July 24, 2024

MEETING MINUTES

OF CALHOUN COUNTY COMMISSIONERS' COURT

MET IN A REGULAR MEETING AT 10:00 A.M. IN THE COMMISSIONERS' COURTROOM IN THE COUNTY COURTHOUSE AT 211 S. ANN STREET SUITE 104 PORT LAVACA, CALHOUN COUNTY, TEXAS.

THE FOLLOWING MEMBERS WERE PRESENT:

Richard Meyer	**County Judge**
David Hall	**Commissioner Pct 1**
Vern Lyssy	**Commissioner Pct 2**
Joel Behrens	**Commissioner Pct 3**
Gary Reese	**Commissioner Pct 4**
Anna Goodman	**County Clerk**
By: Kaddie Smith	**Deputy Clerk**

The subject matter of such meeting is as follows:

1. Call meeting to order.

   Meeting was called to order at 10am by Judge Richard Meyer

2. Invocation.

   Commissioner David Hall

3. Pledges of Allegiance.

   US Flag: Commissioner Gary Reese
   Texas Flag: Commissioner Vern Lyssy

4. General Discussion of Public Matters and Public Participation.

   n/a

5. Approve July 3, 2024, and July 17, 2024 Commissioners' Court Regular Meeting Minutes. (RHM)

RESULT:	**APPROVED [UNANIMOUS]**
MOVER:	Vern Lyssy, Commissioner Pct 2
SECONDER:	David Hall, Commissioner Pct 1
AYES:	Judge Meyer, Commissioner Hall, Lyssy, Behrens, Reese

6. Hear report from Texas Department of State Health Services and receive an update on the Health Disparities Grant Project. (RHM)

Jessica Wise and Gail Wright gave the 2023 report for Region 8.

7. Consider and take necessary action on insurance proceeds check from VFIS in the amount of $1,482.32 for damages to an EMS Vehicle on 3/15/24. (RHM)

RESULT:	**APPROVED [UNANIMOUS]**
MOVER:	Vern Lyssy, Commissioner Pct 2
SECONDER:	Joel Behrens, Commissioner Pct 3
AYES:	Judge Meyer, Commissioner Hall, Lyssy, Behrens, Reese

8. Consider and take necessary action on insurance proceeds check from TAC in the amount of $3,857.40 ($8,857.40 – $5,000.00 deductible) for damages from Jail roof leak on 05/13/24. (RHM)

RESULT:	**APPROVED [UNANIMOUS]**
MOVER:	Gary Reese, Commissioner Pct 4
SECONDER:	David Hall, Commissioner Pct 1
AYES:	Judge Meyer, Commissioner Hall, Lyssy, Behrens, Reese

9. Consider and take necessary action to approve Change Order No. 11 for the Calhoun County Combined Dispatch Facility Project for Calhoun County, Texas and authorize County Judge to sign. (DEH)

Scott Mason explained the change order.

RESULT:	**APPROVED [UNANIMOUS]**
MOVER:	David Hall, Commissioner Pct 1
SECONDER:	Vern Lyssy, Commissioner Pct 2
AYES:	Judge Meyer, Commissioner Hall, Lyssy, Behrens, Reese

10. Consider and take necessary action on resolution for the Texas Department of Transportation Aviation Grant of $150,000 for the AWOS System. (VLL)

RESULT:	**APPROVED [UNANIMOUS]**
MOVER:	Vern Lyssy, Commissioner Pct 2
SECONDER:	David Hall, Commissioner Pct 1
AYES:	Judge Meyer, Commissioner Hall, Lyssy, Behrens, Reese

11. Consider and take necessary action to purchase Lot 9 Block 27 of Port Lavaca Original Townsite (312 S Ann St). Make check payable in the amount of $24,400 to Momentum Title and authorize the County Judge to sign. (RHM)

Judge stated there was a typo and the amount should read $25,400

RESULT:	**APPROVED [UNANIMOUS]**
MOVER:	David Hall, Commissioner Pct 1
SECONDER:	Joel Behrens, Commissioner Pct 3
AYES:	Judge Meyer, Commissioner Hall, Lyssy, Behrens, Reese

12. Discuss and take necessary action on a resolution authorizing publication and posting of a notice of intention to issue Certificates of Obligation for improvements to the County – Owned Hospital; and providing for an effective date. (RHM)

Financial Advisor, Anne with Hilltop Securities gave a presentation. Court approved Resolution with an effective date of September 18, 2024.

RESULT:	**APPROVED [UNANIMOUS]**
MOVER:	Vern Lyssy, Commissioner Pct 2
SECONDER:	David Hall, Commissioner Pct 1
AYES:	Judge Meyer, Commissioner Hall, Lyssy, Behrens, Reese

13. Consider and take necessary action to allow The Calhoun County Judge Richard Meyer sign the Order of Election and provide notice of the November 5, 2024 General Election. (RHM)

RESULT:	**APPROVED [UNANIMOUS]**
MOVER:	Gary Reese, Commissioner Pct 4
SECONDER:	Joel Behrens, Commissioner Pct 3
AYES:	Judge Meyer, Commissioner Hall, Lyssy, Behrens, Reese

14. Accept Monthly Reports from the following County Offices:

    a) County Clerk – June 2024

RESULT:	**APPROVED [UNANIMOUS]**
MOVER:	Vern Lyssy, Commissioner Pct 2
SECONDER:	Gary Reese, Commissioner Pct 4
AYES:	Judge Meyer, Commissioner Hall, Lyssy, Behrens, Reese

15. Consider and take necessary action on any necessary budget adjustments. (RHM)

RESULT:	**APPROVED [UNANIMOUS]**
MOVER:	Gary Reese, Commissioner Pct 4
SECONDER:	Joel Behrens, Commissioner Pct 3
AYES:	Judge Meyer, Commissioner Hall, Lyssy, Behrens, Reese

16. Approval of bills and payroll. (RHM)

MMC Bills:

RESULT:	**APPROVED [UNANIMOUS]**
MOVER:	David Hall, Commissioner Pct 1
SECONDER:	Vern Lyssy, Commissioner Pct 2
AYES:	Judge Meyer, Commissioner Hall, Lyssy, Behrens, Reese

County Bills:

RESULT:	**APPROVED [UNANIMOUS]**
MOVER:	David Hall, Commissioner Pct 1
SECONDER:	Vern Lyssy, Commissioner Pct 2
AYES:	Judge Meyer, Commissioner Hall, Lyssy, Behrens, Reese

Adjourned 10:45am

CALHOUN COUNTY COMMISSIONERS' COURT
PACKET COMPLETION SHEET

✓ **All Agenda Items Properly Numbered**

✓ **Contracts Completed and Signed**

✓ **All 1295's Flagged for Acceptance**
(number of 1295's 1)

✓ **All Documents for Clerk Signature Flagged**
(All documents needing to be attested to need to be signed day of Commissioner's Court.)

On this 25 **day of** July **2024, the packet for the** 24 **day of** July **2024 Commissioners' Court Regular Session was submitted from the Calhoun County Judge's office to the Calhoun County Clerk's Office.**

Debbie Vickery
Calhoun County Judge/Assistant

AGENDA

Richard H. Meyer
County Judge

David Hall, Commissioner, Precinct 1
Vern Lyssy, Commissioner, Precinct 2
Joel Behrens, Commissioner, Precinct 3
Gary Reese, Commissioner, Precinct 4

NOTICE OF MEETING

The Commissioners' Court of Calhoun County, Texas will meet on Wednesday, July 24, 2024 at 10:00 a.m. in the Commissioners' Courtroom in the County Courthouse at 211 S. Ann Street, Suite 104, Port Lavaca, Calhoun County, Texas.

AGENDA

FILED
AT 1:01 O'CLOCK P M
JUL 19 2024
ANNA GOODMAN
COUNTY CLERK, CALHOUN COUNTY, TEXAS
BY: DEPUTY

The subject matter of such meeting is as follows:

1. Call meeting to order.
2. Invocation.
3. Pledges of Allegiance.
4. General Discussion of Public Matters and Public Participation.
5. Approve July 3, 2024, and July 17, 2024 Commissioners' Court Regular Meeting Minutes. (RHM)
6. Hear report from Texas Department of State Health Services and receive an update on the Health Disparities Grant Project. (RHM)
7. Consider and take necessary action on insurance proceeds check from VFIS in the amount of $1,482.32 for damages to an EMS Vehicle on 3/15/24. (RHM)
8. Consider and take necessary action on insurance proceeds check from TAC in the amount of $3,857.40 ($8,857.40 – $5,000.00 deductible) for damages from Jail roof leak on 05/13/24. (RHM)
9. Consider and take necessary action to approve Change Order No. 11 for the Calhoun County Combined Dispatch Facility Project for Calhoun County, Texas and authorize County Judge to sign. (DEH)
10. Consider and take necessary action on resolution for the Texas Department of Transportation Aviation Grant of $150,000 for the AWOS System. (VLL)

11. Consider and take necessary action to purchase Lot 9 Block 27 of Port Lavaca Original Townsite (312 S Ann St). Make check payable in the amount of $24,400 to Momentum Title and authorize the County Judge to sign. (RHM)

12. Discuss and take necessary action on a resolution authorizing publication and posting of a notice of intention to issue Certificates of Obligation for improvements to the County – Owned Hospital; and providing for an effective date. (RHM)

13. Consider and take necessary action to allow The Calhoun County Judge Richard Meyer sign the Order of Election and provide notice of the November 5, 2024 General Election. (RHM)

14. Accept Monthly Reports from the following County Offices:

    a) County Clerk – June 2024

15. Consider and take necessary action on any necessary budget adjustments. (RHM)

16. Approval of bills and payroll. (RHM)

Richard H. Meyer, County Judge
Calhoun County, Texas

A copy of this Notice has been placed on the inside bulletin board of the Calhoun County Courthouse, 211 South Ann Street, Port Lavaca, Texas, which is readily accessible to the general public during regular business hours. This Notice shall remain posted continuously for at least 72 hours preceding the scheduled meeting time. For your convenience, you may visit the county's website at www.calhouncotx.org under "Commissioners' Court Agenda" for any official court postings.

04

July 24, 2024

MEETING MINUTES

OF CALHOUN COUNTY COMMISSIONERS' COURT

MET IN A REGULAR MEETING AT 10:00 A.M. IN THE COMMISSIONERS' COURTROOM IN THE COUNTY COURTHOUSE AT 211 S. ANN STREET SUITE 104 PORT LAVACA, CALHOUN COUNTY, TEXAS.

THE FOLLOWING MEMBERS WERE PRESENT:

Richard Meyer	**County Judge**
David Hall	**Commissioner Pct 1**
Vern Lyssy	**Commissioner Pct 2**
Joel Behrens	**Commissioner Pct 3**
Gary Reese	**Commissioner Pct 4**
Anna Goodman	**County Clerk**
By: Kaddie Smith	**Deputy Clerk**

The subject matter of such meeting is as follows:

1. Call meeting to order.

   Meeting was called to order at 10am by Judge Richard Meyer

2. Invocation.

   Commissioner David Hall

3. Pledges of Allegiance.

   US Flag: Commissioner Gary Reese
   Texas Flag: Commissioner Vern Lyssy

4. General Discussion of Public Matters and Public Participation.

   n/a

05

5. Approve July 3, 2024, and July 17, 2024 Commissioners' Court Regular Meeting Minutes. (RHM)

RESULT:	**APPROVED [UNANIMOUS]**
MOVER:	Vern Lyssy, Commissioner Pct 2
SECONDER:	David Hall, Commissioner Pct 1
AYES:	Judge Meyer, Commissioner Hall, Lyssy, Behrens, Reese

Richard H. Meyer
County Judge

David Hall, Commissioner, Precinct 1
Vern Lyssy, Commissioner, Precinct 2
Clyde Syma, Commissioner, Precinct 3
Gary Reese, Commissioner, Precinct 4

The Commissioners' Court of Calhoun County, Texas met on Wednesday, July 17, 2024, at 10:00 a.m. in the Commissioners' Courtroom in the County Courthouse at 211 S. Ann Street, Suite 104, Port Lavaca, Calhoun County, Texas.

Attached are the true and correct minutes of the above referenced meeting.

Richard Meyer, County Judge
Calhoun County, Texas

Anna Goodman, County Clerk

Deputy Clerk

July 17, 2024

MEETING MINUTES

OF CALHOUN COUNTY COMMISSIONERS' COURT

MET IN A REGULAR MEETING AT 10:00 A.M. IN THE COMMISSIONERS' COURTROOM IN THE COUNTY COURTHOUSE AT 211 S. ANN STREET SUITE 104 PORT LAVACA, CALHOUN COUNTY, TEXAS.

THE FOLLOWING MEMBERS WERE PRESENT:

Richard Meyer	**County Judge**
David Hall	**Commissioner Pct 1**
Vern Lyssy	**Commissioner Pct 2**
Joel Behrens	**Commissioner Pct 3**
Gary Reese	**Commissioner Pct 4**
Anna Goodman	**County Clerk**
By: Kaddie Smith	**Deputy Clerk**

The subject matter of such meeting is as follows:

1. Call meeting to order.

   Meeting was called to order at 10am by Judge Richard Meyer

2. Invocation.

   Commissioner David Hall

3. Pledges of Allegiance.

   US Flag: Commissioner Gary Reese
   Texas Flag: Commissioner Vern Lyssy

4. General Discussion of Public Matters and Public Participation.

   n/a

5. Approve July 3, 2024 and July 10, 2024 Commissioners' Court Regular Meeting Minutes. (RHM)

Court agreed to approve the Minutes for July 10, 2024. Minutes for July 3, 2024 are not yet ready for approval.

RESULT:	**APPROVED [UNANIMOUS]**
MOVER:	Vern Lyssy, Commissioner Pct 2
SECONDER:	Joel Behrens, Commissioner Pct 3
AYES:	Judge Meyer, Commissioner Hall, Lyssy, Behrens, Reese

6. Consider and take necessary action to approve the Final Plat of Bayshore Ranchettes. (JMB)

Terry Ruddick explained the final plat.

RESULT:	**APPROVED [UNANIMOUS]**
MOVER:	Joel Behrens, Commissioner Pct 3
SECONDER:	Gary Reese, Commissioner Pct 4
AYES:	Judge Meyer, Commissioner Hall, Lyssy, Behrens, Reese

7. Consider and take necessary action to accept anonymous donation to the Sheriff's Office to be deposited into the Motivation account (2697-001-49082-679) in the amount of$75.00. (RHM)

RESULT:	**APPROVED [UNANIMOUS]**
MOVER:	Vern Lyssy, Commissioner Pct 2
SECONDER:	David Hall, Commissioner Pct 1
AYES:	Judge Meyer, Commissioner Hall, Lyssy, Behrens, Reese

8. Consider and take necessary action to authorize Judge Meyer to sign letter of request to Texas Historical Commissioner requesting the use of a small brush hog/hydroax to clear the walking paths for the Green Lake Enhancement Project in Calhoun County, Texas (Texas Antiquities Permit No. 30942; THC Tracking# 202407616). (GDR)

Matt Glaze explained the request.

RESULT:	**APPROVED [UNANIMOUS]**
MOVER:	Gary Reese, Commissioner Pct 4
SECONDER:	Joel Behrens, Commissioner Pct 3
AYES:	Judge Meyer, Commissioner Hall, Lyssy, Behrens, Reese

9. To Approve and Accept switching employee elected insurance to UNUM. This would take the place of policies with Principal, Reliance and Trustmark except leaving cashed bases policies in place. If approved this would begin October 1, 2024. (RHM)

Rhonda Kokena explained the reason it would be beneficial to switch.

RESULT:	**APPROVED [UNANIMOUS]**
MOVER:	Vern Lyssy, Commissioner Pct 2
SECONDER:	Joel Behrens, Commissioner Pct 3
AYES:	Judge Meyer, Commissioner Hall, Lyssy, Behrens, Reese

10. Consider and take necessary action to approve the Final Plat of the Amended Plat of In the Oaks at Swan Point Subdivision. (RHM)

Henry Danysh explained final plat.

RESULT:	**APPROVED [UNANIMOUS]**
MOVER:	Gary Reese, Commissioner Pct 4
SECONDER:	Joel Behrens, Commissioner Pct 3
AYES:	Judge Meyer, Commissioner Hall, Lyssy, Behrens, Reese

11. Consider and take necessary action to approve Agreement #3068497 with Dewitt Poth & Sons for Copy Machine Lease for the Elections Office and allow the Elections Administrator to sign agreement. (RHM)

RESULT:	**APPROVED [UNANIMOUS]**
MOVER:	David Hall, Commissioner Pct 1
SECONDER:	Vern Lyssy, Commissioner Pct 2
AYES:	Judge Meyer, Commissioner Hall, Lyssy, Behrens, Reese

12. Consider and take necessary action to approve the contract with Keith Staff dba. Staff Concrete Construction for Bid Number 2024.07 – Magnolia Beach – Ocean Drive Bulkhead Cap Replacement for Calhoun County, Texas and authorize the County Judge to sign. (DEH)

RESULT:	**APPROVED [UNANIMOUS]**
MOVER:	David Hall, Commissioner Pct 1
SECONDER:	Vern Lyssy, Commissioner Pct 2
AYES:	Judge Meyer, Commissioner Hall, Lyssy, Behrens, Reese

13. Accept Monthly Reports from the following County Offices:

    i. Sheriff's Office – June 2024
    ii. Justice of the Peace, Pct 4 – June 2024

RESULT:	**APPROVED [UNANIMOUS]**
MOVER:	Joel Behrens, Commissioner Pct 3
SECONDER:	Gary Reese, Commissioner Pct 4
AYES:	Judge Meyer, Commissioner Hall, Lyssy, Behrens, Reese

14. Consider and take necessary action on any necessary budget adjustments. (RHM)

RESULT:	**APPROVED [UNANIMOUS]**
MOVER:	Gary Reese, Commissioner Pct 4
SECONDER:	Joel Behrens, Commissioner Pct 3
AYES:	Judge Meyer, Commissioner Hall, Lyssy, Behrens, Reese

15. Approval of bills and payroll. (RHM)

MMC Bills:	
RESULT:	**APPROVED [UNANIMOUS]**
MOVER:	David Hall, Commissioner Pct 1
SECONDER:	Vern Lyssy, Commissioner Pct 2
AYES:	Judge Meyer, Commissioner Hall, Lyssy, Behrens, Reese

Indigent Healthcare:	
RESULT:	**APPROVED [UNANIMOUS]**
MOVER:	David Hall, Commissioner Pct 1
SECONDER:	Vern Lyssy, Commissioner Pct 2
AYES:	Judge Meyer, Commissioner Hall, Lyssy, Behrens, Reese

County Bills:	
RESULT:	**APPROVED [UNANIMOUS]**
MOVER:	David Hall, Commissioner Pct 1
SECONDER:	Vern Lyssy, Commissioner Pct 2
AYES:	Judge Meyer, Commissioner Hall, Lyssy, Behrens, Reese

Adjourned 10:20am

06

6. Hear report from Texas Department of State Health Services and receive an update on the Health Disparities Grant Project. (RHM)

Jessica Wise and Gail Wright gave the 2023 report for Region 8.

Debbie Vickery

From:	Kirby.Cassius@dshs.texas.gov (Cassius,Kirby) <Kirby.Cassius@dshs.texas.gov>
Sent:	Thursday, June 27, 2024 10:20 AM
To:	Debbie Vickery
Subject:	Request for Commissioners' Court - DSHS

Good morning,

The Texas Department of State Health Services (DSHS) would like to be added to the Calhoun County Commissioners' Court Agenda for Wednesday, July 24, 2024, at 10:00a.m.

The court will hear a report from our DSHS Field Office and receive an update on the Health Disparities Grant Project. We will be issuing copies of the 2023 Annual Report for members of the court that day as well. Please let me know once we have confirmation that we have been added to the agenda so that I may inform our team.

Thank you,

Kirby M. Cassius

Public Health Prevention Specialist I
Texas Department of State Health Services – Region 08
Community Health Improvement
436 SH-35 N
Port Lavaca, Texas 77979
Office: (361) 553-5560 Cell: (210) 797-9729
Fax: (361) 552-1667
kirby.cassius@dshs.texas.gov

TEXAS Health and Human Services | Texas Department of State Health Services

DSHS is on Twitter, Facebook and YouTube

07

7. Consider and take necessary action on insurance proceeds check from VFIS in the amount of $1,482.32 for damages to an EMS Vehicle on 3/15/24. (RHM)

RESULT:	**APPROVED [UNANIMOUS]**
MOVER:	Vern Lyssy, Commissioner Pct 2
SECONDER:	Joel Behrens, Commissioner Pct 3
AYES:	Judge Meyer, Commissioner Hall, Lyssy, Behrens, Reese

Debbie Vickery

From:	Erica.Perez@calhouncotx.org (Erica Perez) <Erica.Perez@calhouncotx.org>
Sent:	Tuesday, July 16, 2024 9:48 AM
To:	Debbie.vickery@calhouncotx.org; 'Richard H. Meyer'; 'David Hall'; 'vern lyssy'; joel.behrens@calhouncotx.org; 'Gary Reese'; Erika.Rojas@calhouncotx.org; Donna.Hall@calhouncotx.org
Cc:	Dustin. Jenkins@calhouncotx. org -- Dustin Jenkins
Subject:	Agenda Item - Insurance Proceeds - EMS
Attachments:	VFIS Insurance Proceeds 4-EMS-031524.pdf

Debbie,

Please add the following to the next available Commissioners Court agenda.

- Consider and take necessary action on insurance proceeds check from VFIS in the amount of $1,482.32 for damages to an EMS Vehicle on 3/15/24.

Best regards,

Erica Perez
First Assistant Auditor
Calhoun County
202 S. Ann, Suite B
Port Lavaca, TX 77979
Phone: 361. 553.4612
Fax: 361.553.4614

Calhoun County Texas

VFIS.

VFIS Claims Management
P O Box 5126
York, PA 17405
(800) 233-1957

COPY

CALHOUN COUNTY
202 S ANN STREET, SUITE B
PORT LAVACA, TX 77979

PAYMENT IS BEING ISSUED FOR: 2020 dodge ALS VIN:5292
Supplement

CHECK NUMBER: 0000080888
CLAIM NUMBER: TXCM24030684
PAYMENT AMOUNT: $*******1,482.32

Payment on behalf of National Union Fire Insurance Company of Pittsburgh, PA

Any person who knowingly presents a false or fraudulent claim for the payment of a loss is guilty of a crime and subject to criminal prosecution and civil penalties.

lhess

PLEASE DETACH VOUCHER AND DEPOSIT CHECK PROMPTLY

THIS CHECK IS VOID WITHOUT A MULTI-COLORED BACKGROUND AND AN ARTIFICIAL WATERMARK ON THE BACK - HOLD AT AN ANGLE TO VIEW

VFIS.

Glatfelter Claims Management, Inc
P O Box 5126
York, PA 17405
Fax (717) 747-7051
(800) 233-1957

60-295
313
M & T Bank
Altoona, PA

CHECK NO. 0000080888
CHECK DATE 07/11/2024
Void 90 days after this date

CLAIM NUMBER	POLICY NUMBER	PAYEE TAXPAYER ID	AGENT 1	POLICY DATES
TXCM24030684	VFNUCM0002360-04	**-*******	WinStar Insurance Group LLC	1/1/2024-1/1/2025

AGENT 2	POLICY HOLDER	CLAIMANT	DATE OF LOSS
GSM Insurors	CALHOUN COUNTY	CALHOUN COUNTY	03/15/2024

PAY: One Thousand Four Hundred Eighty Two Dollars And 32/100 Dollars

$*******1,482.32

TO THE ORDER OF

CALHOUN COUNTY
202 S ANN STREET, SUITE B
PORT LAVACA, TX 77979

AUTHORIZED SIGNATURE

SIGNATURE HAS A COLORED BACKGROUND • BORDER CONTAINS MICROPRINTING

[redacted]

08

8. Consider and take necessary action on insurance proceeds check from TAC in the amount of $3,857.40 ($8,857.40 – $5,000.00 deductible) for damages from Jail roof leak on 05/13/24. (RHM)

RESULT:	**APPROVED [UNANIMOUS]**
MOVER:	Gary Reese, Commissioner Pct 4
SECONDER:	David Hall, Commissioner Pct 1
AYES:	Judge Meyer, Commissioner Hall, Lyssy, Behrens, Reese

Debbie Vickery

From:	Erica.Perez@calhouncotx.org (Erica Perez) <Erica.Perez@calhouncotx.org>
Sent:	Tuesday, July 16, 2024 9:58 AM
To:	Debbie.vickery@calhouncotx.org; 'Richard H. Meyer'; 'David Hall'; 'vern lyssy'; joel.behrens@calhouncotx.org; 'Gary Reese'; everett wood; Rachel Martinez
Subject:	Agenda Item - Insurance Proceeds - Jail
Attachments:	TAC Insurance Proceeds-Jail-05132024.pdf

Debbie,

Please add the following to the next available Commissioners Court agenda.

- Consider and take necessary action on insurance proceeds check from TAC in the amount of $3,857.40 ($8,857.40 – $5,000.00 deductible) for damages from Jail roof leak on 05/13/24.

Thank you.

Best regards,

Erica Perez
First Assistant Auditor
Calhoun County
202 S. Ann, Suite B
Port Lavaca, TX 77979
Phone: 361. 553.4612
Fax: 361.553.4614

Calhoun County Texas

TEXAS ASSOCIATION OF COUNTIES
RISK MANAGEMENT POOL-CLAIMS

CHECK DATE	CHECK NO.
7/9/2024	75222

75222

VENDOR ID	VENDOR NAME	ACCOUNT NUMBER
	Calhoun County	

DATE	INVOICE NO.	DESCRIPTION	AMOUNT
7/9/2024	PR20240737-1	Structure RCV payment for Jail roof leak	$8857.40
7/9/2024	PR20240737-1	Deductible	$-5000.00

DOCUMENT CHEMICAL REACTIVE PROPERTIES AND FEATURES A FOIL HOLOGRAM

75222

TEXAS ASSOCIATION OF COUNTIES
RISK MANAGEMENT POOL-CLAIMS
1210 SAN ANTONIO STREET
AUSTIN, TX 78701
(512) 478-8753

FROST BANK
30-9/1140

DATE 7/9/2024

AMOUNT $ 3,857.40

PAY THREE THOUSAND EIGHT HUNDRED FIFTY-SEVEN AND 40 / 100 DOLLARS

VOID AFTER 180 DAYS

TO THE ORDER OF:
Calhoun County
211 S Ann St
Port Lavaca, TX 779794203

Susan M Redford
Julie Rog

[redacted]

TEXAS ASSOCIATION OF COUNTIES
RISK MANAGEMENT POOL-CLAIMS

75222

Calhoun County
211 S Ann St
Port Lavaca, TX 779794203

TO REORDER CALL: (706) 327-9550

W14SF001014M 03/23

09

9. Consider and take necessary action to approve Change Order No. 11 for the Calhoun County Combined Dispatch Facility Project for Calhoun County, Texas and authorize County Judge to sign. (DEH)

Scott Mason explained the change order.

RESULT:	**APPROVED [UNANIMOUS]**
MOVER:	David Hall, Commissioner Pct 1
SECONDER:	Vern Lyssy, Commissioner Pct 2
AYES:	Judge Meyer, Commissioner Hall, Lyssy, Behrens, Reese

CHANGE ORDER

No. **Eleven (11)**

PROJECT **CALHOUN COUNTY COMBINED DISPATCH FACILITY**

DATE OF ISSUANCE 07/18/24 EFFECTIVE DATE 07/24/24

OWNER **CALHOUN COUNTY**

OWNER's Contract No. N/A

CONTRACTOR **BLS CONSTRUCTION, INC.** ENGINEER **G & W ENGINEERS, INC.**
Job# 5310.020

You are directed to make the following changes in the Contract Documents.

Reason for Change Order: Interior Room Signage Allowance No. 2 has been omitted and credited to Allowance No. 1 increasing it from $35,000 to $40,000 (see below). REF: BLS attached Proposal Requests: No. 11 credited $350.00 to direct contract amount; No. 12 for $0.00; No. 13 for $853.52; No. 14 for $2,226.81; No. 15 for $964.01 and No. 16 for $1,068.87 for a total $5,113.21 towards the Contingency Budget. Added 50 additional days due to weather, manufacturing delay and to complete punch list.

Attachments (List documents supporting change) **BLS Construction Proposal Requests Listed above.**

CHANGE IN CONTRACT PRICE:	CHANGE IN CONTRACT TIMES:
Original Contract Price $ 1,877,350.00	Original Contract Times Substantial Completion: 280 Ready for final payment: May 27, 2024 days or dates
Contract changes from previous Change Orders No. 1 to No. 2 $ 12,187.30 Original Contingency Allowance Budget $35,000.00 Change Order 11 increase to Allowance 1 $5,000.00 New Allowance Budget Price $40,000.00	Net changes from previous Change Orders No. 1 to No. 10 37 Days days
Changes to Cont. Allowance from Previous C.O. No. 3 to 10 $30,882.49 Allowance Budget Prior to this Change Order $4,117.51 C.O. No. 11 approved amount $5,113.21	Net Cont. Allowance Changes from C.O. Numbers 3 to 11 $35,995.70 New Contingency Allowance Budget $4,004.30
Contract Price prior to this Change Order $ 1,889,537.30	Contract Times prior to this Change Order Substantial Completion: 317 Ready for final payment: July 3, 2024 days or dates
Net Increase (decrease) of this Change Order $ (350.00)	Net Increase (~~decrease~~) of this Change Order 50
Contract Price with all approved Change Orders $ 1,889,187.30	Contract Times with all approved Change Orders Substantial Completion: 367 Ready for final payment: August 22, 2024 days or dates

RECOMMENDED:	APPROVED:	ACCEPTED:
By: [illegible], P.E.	By: [illegible]	By: [illegible]
Engineer (Authorized Signature)	Owner (Authorized Signature)	Contractor (Authorized Signature)
G & W Engineers, Inc.	Calhoun County	BLS Construction, Inc.
Date: 07/18/2024	Date: 7-24-2024	Date: 7/18/2024

FACILITIES PLANNING . DESIGN . CONSTRUCTION
207 Fahrenthold Street, El Campo, Texas 77437
Office: (979) 543-2696 . Fax: (979) 543-5006
www.blsconstruction.com

Proposal Request

Project Names: Calhoun County Dispatch Building
Location: 312 W Live Oak St, Port Lavaca, TX.

Contractor: BLS Construction
Address: 207 Fahrenthold, El Campo, Texas 77437

PPA No.:
Proposal Request No.: 11
Date: 5.24.2024
Phone: 979.543.2696

The Contractor is hereby directed to make the following changes in the Contract:

ITEM NO.	DESCRIPTION/UNIT BREAKDOWN/UNIT COSTS (Indicate Critical Path Schedule impact for each Item)	COST (Indicate + or -)
	Credit for (2) trees with 2" caliber, 5' in height	
1	Trees (2) - $125.00	$ (250.00)
2	Installation (2) - $50.00	$ (100.00)
	SUBTOTAL FROM ATTACHED SHEETS (IF ANY)	$ (350.00)
	TOTAL COST (This Change Order Only) =	$ (350.00)

Change in Contract Duration/Time by This Change Order: (No Change) (Increase) (Decrease) BY (0) CALENDER DAYS.

NEW CONTRACT COMPLETION DATE: No change

Signature-Owner
Date 1-24-2024

Heather Reese
Signature-BLS Construction
5.24.2024
Date

CONSTRUCTION

FACILITIES PLANNING . DESIGN . CONSTRUCTION
207 Fahrenthold Street, El Campo, Texas 77437
Office: (979) 543-2696 . Fax: (979) 543-5006
www.blsconstruction.com

Proposal Request

Project Names: Calhoun County Dispatch Building
Location: 312 W Live Oak St. Port Lavaca, TX.

PPA No.:
Proposal Request No.: 12
Date: 7.18.2024 R
Phone: 979.543.2696

Contractor: BLS Construction
Address: 207 Fahrenthold, El Campo, Texas 77437

The Contractor is hereby directed to make the following changes in the Contract:

ITEM NO.	DESCRIPTION/UNIT BREAKDOWN/UNIT COSTS (Indicate Critical Path Schedule impact for each item)	COST (Indicate + or -)
1	Add tile to the ceilings in the showers (2) *Includes labor and materials*	No Charge
	SUBTOTAL FROM ATTACHED SHEETS (IF ANY)	$0.00
	Overhead & Profit @ __10%__ =_	$ -
	P&P Bond @ __2.5%__ =_	$ -
	TOTAL COST (This Change Order Only) =_	$ -

Change in Contract Duration/Time by This Change Order: (No Change) (Increase) (Decrease) BY ___(0)___ CALENDER DAYS.

NEW CONTRACT COMPLETION DATE: No change

Signature-Owner — Date: 7-24-2024

Heather Reese
Signature-BLS Construction — Date: 7.18.2024 R

SUBMIT TO: CONSTRUCTION

CHANGE/ADD-ON 2

MAILING ADDRESS: 207 Farenthold St.

PHYS. ADDRESS: 207 Farenthold St.

CITY,STATE, ZIP: El Campo, TX 77437

PHONE: (979) 543-2696

CELL PHONE: (979) 637-0427

EL CAMPO CARPET ONE

P.O. Box 1359 / 2371 E. Jackson St.
El Campo, Tx 77437
(979) 541-5600

SHIP TO:
Calhoun County Combined Dispatch Facility
ADDRESS: 312 West Live Oak St.

CITY: Port Lavaca, TX 77979

SUBMITTED BY: Brian Svetlik

CHANGE ORDER DATE: 6/5/2024

	PRODUCT / WORK DESCRIPTION / AREAS	AMOUNT
	Volume 1.0 6x6 Tile - Sonic White(VL75), setting material, grout & installation on ceilings of Showers in rooms 105 & 106	$997.05

ALL MATERIAL IS GUARANTEED TO BE AS SPECIFIED, AND THE ABOVE WORK TO BE PERFORMED IN ACCORDANCE WITH THE DRAWINGS AND SPECIFICATIONS SUBMITTED FOR ABOVE WORK AND COMPLETED IN A SUBSTANTIAL WORKMANLIKE MANNER FOR THE SUM OF:

SALES TAX	EXEMPT
ADD-ON TOTAL	**$997.05**

WITH PAYMENTS TO BE MADE AS FOLLOWS: 1/2 Draw, Balance due upon completion.

ACCEPTANCE OF PROPOSAL

THE ABOVE PRICES, SPECIFICATIONS AND CONDITIONS ARE SATISFACTORY AND ARE HEREBY ACCEPTED.
YOU ARE AUTHORIZED TO DO THE WORK AS SPECIFIED.
PAYMENTS WILL BE MADE AS OUTLINED ABOVE.

SIGNATURE Joy Janak DATE 6.6.2024

CONSTRUCTION

FACILITIES PLANNING . DESIGN . CONSTRUCTION
207 Fahrenthold Street, El Campo, Texas 77437
Office: (979) 543-2696 . Fax: (979) 543-5006
www.blsconstruction.com

Proposal Request

Project Names: Calhoun County Dispatch Building
Location: 312 W Live Oak St., Port Lavaca, Tx

Contractor: BLS Construction
Address: 207 Fahrenthold, El Campo, Texas 77437

PPA No.:
Proposal Request No.: 13
Date: 7.17.2024
Phone: 979.543.2696

The Contractor is hereby directed to make the following changes in the Contract:

ITEM NO.	DESCRIPTION/UNIT BREAKDOWN/UNIT COSTS (Indicate Critical Path Schedule impact for each Item)	COST (Indicate + or -)
1	Additional plumbing for installation of ice-machine-not is scope of work	$ 757.00
	Includes labor and materials	
	SUBTOTAL FROM ATTACHED SHEETS (IF ANY)	$ 757.00
	Overhead & Profit @ __10%__ =_	$ 75.70
	P&P Bond @ __2.5%__ =_	$ 20.82
	TOTAL COST (This Change Order Only) =_	$ 853.52

Change in Contract Duration/Time by This Change Order: (No Change) (Increase) (Decrease) BY ___(0)_______ CALENDER DAYS.

NEW CONTRACT COMPLETION DATE: No change

Signature-Owner 7-24-2024
Date

Signature-BLS Construction Joy Janak 7.17.2024
Date

PROPOSAL

Kotlar Plumbing Company
Larry Kotlar
M18271
203 S. East
Edna, Texas 77957
361-782-3536   361-782-2288

Proposal Submitted to: BLS
Job Name: Calhoun Dispatch

Date: 7/17/2024

Run a 1'' PVC drain line from the ice maker to sink drain.

Seven Hundred Fifty-Seven dollars and 00/100_____ ($757.00)

Thank you for the opportunity of working with you. Payment Due upon Completion.

All Material is guaranteed to be as specified. All work to be completed in a workmanlike manner according to standard practices. Any alteration or or deviation from above specification involving extra cost will be executed only upon written orders, and will become an extra charge over and above estimate. All agreements contingent upon strikes, accidents or delays beyond our control. Owner to carry fire, tornado and other necessary insurance. Our workers are fully covered by Workmen's Compensation Insurance._Carpenter or landscape work is to be provided by others.and not responsibility of Kotlar Plumbing.
Acceptance of Proposal - The above prices, specifications and conditions are satisfactory and are hereby accepted, you are authorized to do the work as specified. Payment will be made as outlined above.

Authorized Signature: ______________________

Note: This proposal may be withdrawn by us if not accepted within 30 days.

Date of Acceptance: 7-24-2024

CONSTRUCTION

FACILITIES PLANNING . DESIGN . CONSTRUCTION
207 Fahrenthold Street, El Campo, Texas 77437
Office: (979) 543-2696 . Fax: (979) 543-5006
www.blsconstruction.com

Proposal Request

Project Names: Calhoun County Dispatch Building
Location: 312 W. Live Oak Street, Port Lavaca, Tx

Contractor: BLS Construction
Address: 207 Fahrenthold, El Campo, Texas 77437

PPA No.:
Proposal Request No.: 14
Date: 6.27.2027
Phone: 979.543.2696

The Contractor is hereby directed to make the following changes in the Contract:

ITEM NO.	DESCRIPTION/UNIT BREAKDOWN/UNIT COSTS (Indicate Critical Path Schedule impact for each Item)	COST (Indicate + or -)
1	Change door 125 to full view glass-non fire rated	$1,075.00
2	Labor to remove current door and install new door	$900.00
	SUBTOTAL FROM ATTACHED SHEETS (IF ANY)	$1,975.00
	Overhead & Profit @ __10%__ =_	$197.50
	P&P Bond @ __2.5%__ =_	$54.31
	TOTAL COST (This Change Order Only) =_	$2,226.81

Change in Contract Duration/Time by This Change Order: (No Change) (Increase) (Decrease) BY __(0)__ CALENDER DAYS.

NEW CONTRACT COMPLETION DATE: No change

Signature-Owner 7-24-2024
Date

Joy Janak
Signature-BLS Construction 6.27.2027
Date

VICTORIA BUILDER SUPPLY CO.

Victoria Builder Supply Company Inc.
5301 John Stockbauer Dr, Victoria, Texas 77904
(361) 572-8929

Estimate 15470330
Job
Estimate Date 6/26/2024

Billing Address
BLS Construction
207 Fahrenthold
El Campo, TX 77437 USA

Job Address
Calhoun County Dispatch Building
312 West Live Oak Street
Port Lavaca, TX 77979 USA

Estimate Details

Added Door

Service #	Description	Quantity	Your Price	Your Total
Note	Door only, no hardware included in quote	1.00	$0.00	$0.00

Materials

Material	Description	Quantity	Your Price	Your Total
PLAM Custom	3070 x 1-3/4, LH, Full Lite Cut out with Glass and Lite Kit, Non-Fire Rated	1.00	$1,075.00	$1,075.00

Potential Savings	$0.00
Sub-Total	$1,075.00
Tax	$88.69
Total	$1,163.69

Thank you for choosing Victoria Builder Supply Company Inc.

FACILITIES PLANNING . DESIGN . CONSTRUCTION
207 Fahrenthold Street, El Campo, Texas 77437
Office: (979) 543-2696 . Fax: (979) 543-5006
www.blsconstruction.com

Proposal Request

Project Names: Calhoun County Dispatch Building
Location: 312 W. Live Oak St., Port Lavaca, Texas

Contractor: BLS Construction
Address: 207 Fahrenthold, El Campo, Texas 77437

PPA No.:
Proposal Request No.: 15
Date: 7.2.2024
Phone: 979.543.2696

The Contractor is hereby directed to make the following changes in the Contract:

ITEM NO.	DESCRIPTION/UNIT BREAKDOWN/UNIT COSTS (Indicate Critical Path Schedule impact for each Item)	COST (Indicate + or -)
1	Add closer to door 118	$ 495.00
2	Labor to install	$ 360.00
	Includes labor and materials	
	SUBTOTAL FROM ATTACHED SHEETS (IF ANY)	$ 855.00
	Overhead & Profit @ __10%__ =_	$ 85.50
	P&P Bond @ __2.5%__ =_	$ 23.51
	TOTAL COST (This Change Order Only) =_	$ 964.01

Change in Contract Duration/Time by This Change Order: (No Change) (Increase) (Decrease) BY ___(0)___ CALENDER DAYS.

NEW CONTRACT COMPLETION DATE: No change

Signature-Owner

7-24-2024
Date

Joy Janak
Signature-BLS Construction

7.2.2024
Date

Victoria Builder Supply Company Inc.
5301 John Stockbauer Dr, Victoria, Texas 77904
(361) 572-8929

Estimate 15528506
Job
Estimate Date 7/2/2024

Billing Address
BLS Construction
207 Fahrenthold
El Campo, TX 77437 USA

Job Address
Calhoun County Dispatch Building
312 West Live Oak Street
Port Lavaca, TX 77979 USA

Estimate Details

Closer for Joy

Service #	Description	Quantity	Your Price	Your Total
Note	Note: Lead Time 2-3 weeks	1.00	$0.00	$0.00

Materials

Material	Description	Quantity	Your Price	Your Total
CH Custom	Closer, LCN 1461 HD FC SRI TBSRT, 689	1.00	$495.00	$495.00

Potential Savings	$0.00
Sub-Total	$495.00
~~Tax~~	~~$40.84~~
~~Total~~	~~$535.84~~

Thank you for choosing Victoria Builder Supply Company Inc.

BLS CONSTRUCTION

FACILITIES PLANNING . DESIGN . CONSTRUCTION
207 Fahrenthold Street, El Campo, Texas 77437
Office: (979) 543-2696 . Fax: (979) 543-5006
www.blsconstruction.com

Proposal Request

Project Names:	Calhoun County Dispatch Building	PPA No.:	
Location:	312 W Live Oak Street, Port Lavaca, Tx	Proposal Request No.:	16
		Date:	7.3.2024
Contractor:	BLS Construction	Phone:	979.543.2696
Address:	207 Fahrenthold, El Campo, Texas 77437		

The Contractor is hereby directed to make the following changes in the Contract:

ITEM NO.	DESCRIPTION/UNIT BREAKDOWN/UNIT COSTS (Indicate Critical Path Schedule impact for each Item)	COST (Indicate + or -)
1	Add (4) blinds to room 112 - Dispatch Control Room	$ 948.00
	Includes labor and materials	
	SUBTOTAL FROM ATTACHED SHEETS (IF ANY)	$ 948.00
	Overhead & Profit @ __10%__ =_	$ 94.80
	P&P Bond @ __2.5%__ =_	$ 26.07
	TOTAL COST (This Change Order Only) =_	$ 1,068.87

Change in Contract Duration/Time by This Change Order: (No Change) (Increase) (Decrease) BY ___(0)___ CALENDER DAYS.

NEW CONTRACT COMPLETION DATE: No change

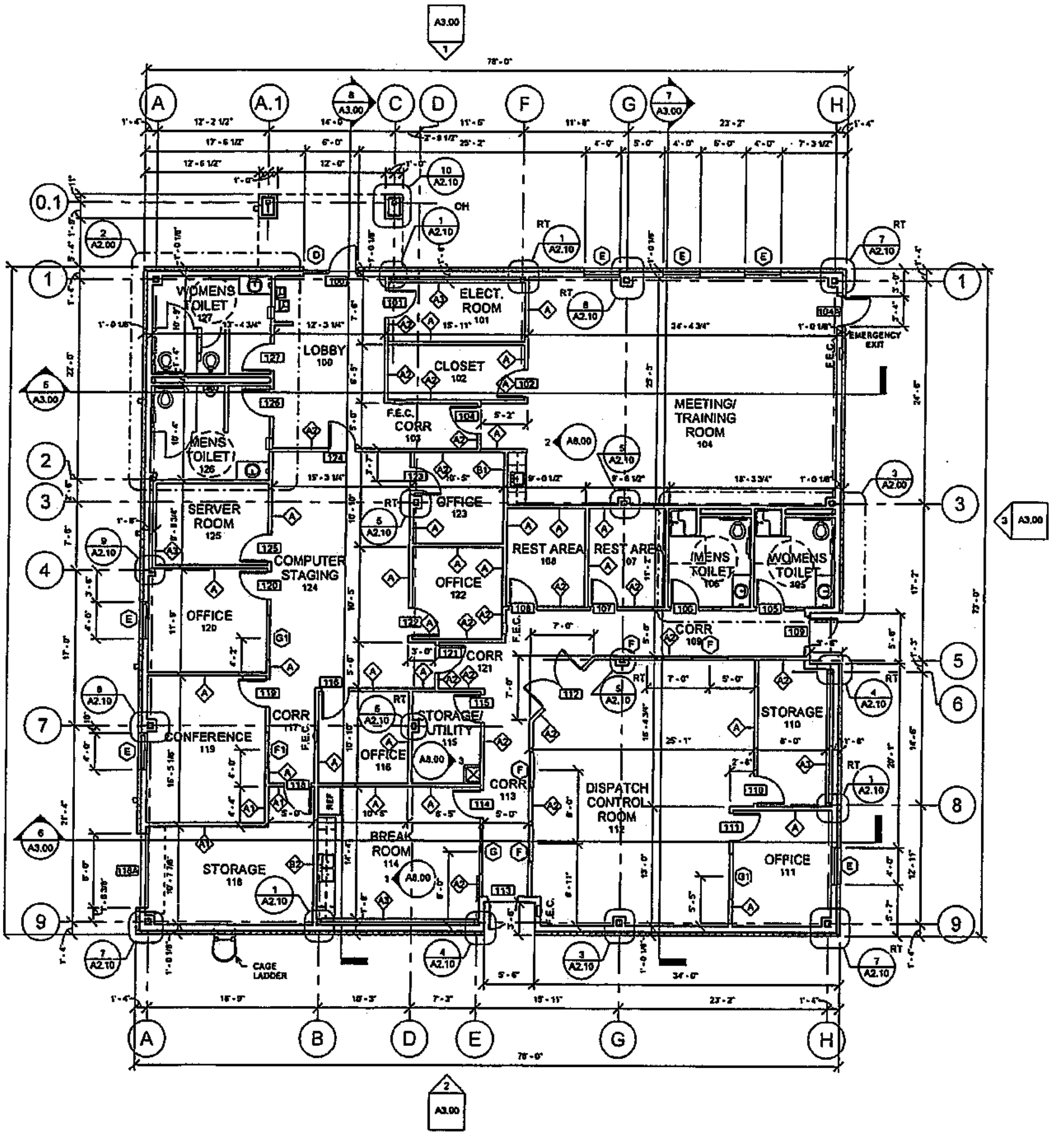
[signature] 7-24-2024
Signature-Owner Date

Heather Reese 7.3.2024
Signature-BLS Construction Date

A	5/8" TYPE "X" FIRECODE GYP.BD. ON EACH SIDE OF 3 5/8" METAL STUDS TO 12" ABOVE CEILING W/ 5/8" METAL STUD BRACING @ 4'-0" O.C. BRACED ACROSS TOP OF WALLS. PROVIDE SOUND BATT INSULATION.
A1	5/8" TYPE "X" FIRECODE GYP.BD. ON EACH SIDE OF 3 5/8" METAL STUDS TO DECK. PROVIDE SOUND BATT INSULATION.
A2	5/8" TYPE "X" FIRECODE GYP.BD. ON EACH SIDE OF 3 5/8" METAL STUDS TO DECK. PROVIDE SOUND BATT INSULATION. 1 HR RATED WALL ASSEMBLY.
A3	5/8" TYPE "X" FIRECODE GYP. BD. ON ONE SIDE OF 3 5/8" METAL STUDS TO DECK.
B	5/8" TILE BACKING PANEL ON EACH SIDE OF 3 5/8" METAL STUDS TO 12" ABOVE CEILING W/ 5/8" METAL STUD BRACING @ 4'-0" O.C. BRACED ACROSS TOP OF WALLS.
B1	5/8" WATER RESISTANT GYP.BD. ON ONE SIDE & 5/8" TYPE "X" FIRECODE GYP. BD. ON OTHER SIDE OF 3 5/8" METAL STUDS TO 12" ABOVE CEILING W/ 5/8" METAL STUD BRACING @ 4'-0" O.C. BRACED ACROSS TOP OF WALLS. PROVIDE SOUND BATT INSULATION.
B2	5/8" WATER RESISTANT GYP.BD. ON ONE SIDE & 5/8" TYPE "X" FIRECODE GYP. BD. ON OTHER SIDE OF 3 5/8" METAL STUDS TO DECK. PROVIDE SOUND BATT INSULATION.
B3	5/8" WATER RESISTANT GYP.BD. ON ONE SIDE & 5/8" TYPE "X" FIRECODE GYP. BD. ON OTHER SIDE OF 3 5/8" METAL STUDS TO DECK. PROVIDE SOUND BATT INSULATION. 1 HR RATED WALL ASSEMBLY.
B4	5/8" TILE BACKING PANEL ON ONE SIDE OF 3 5/8" METAL STUDS TO 48" ABOVE CEILING W/ 5/8" METAL STUD BRACING @ 4'-0" O.C. BRACED ACROSS TOP OF WALLS. PROVIDE SOUND BATT INSULATION.
B5	5/8" WATER RESISTANT GYP.BD. ON ONE SIDE & 5/8" TILE BACKING PANEL ON OTHER SIDE OF 3 5/8" METAL STUDS TO 48" ABOVE CEILING W/ 5/8" METAL STUD BRACING @ 4'-0" O.C. BRACED ACROSS TOP OF WALLS. PROVIDE SOUND BATT INSULATION.
B6	5/8" WATER RESISTANT GYP.BD. ON ONE SIDE & 5/8" TYPE "X" FIRECODE GYP. BD. ON OTHER SIDE OF 3 5/8" METAL STUDS TO 48" ABOVE CEILING W/ 5/8" METAL STUD BRACING @ 4'-0" O.C. BRACED ACROSS TOP OF WALLS. PROVIDE SOUND BATT INSULATION.
B7	5/8" TILE BACKING PANEL ON ONE SIDE & 5/8" TYPE "X" FIRECODE GYP. BD. ON OTHER SIDE OF 3 5/8" METAL STUDS TO 48" ABOVE CEILING W/ 5/8" METAL STUD BRACING @ 4'-0" O.C. BRACED ACROSS TOP OF WALLS. PROVIDE SOUND BATT INSULATION.

4 PARTITION TYPES

1/2" = 1'-0"



1 GROUND FLOOR PLAN

1/8" = 1'-0"

PLAN NORTH

1	9/11/23	PLUMBING CHASE REV.
C	4/24/23	PER ADDENDUM NO. 1
B	3/09/23	FOR PERMIT & BIDDING ONLY
A	2/24/23	FOR REVIEW/APPROVAL

G & W

COMBINED DISPATCH BUILDING
CALHOUN COUNTY, TEXAS
312 West Live Oak St., Port Lavaca

GROUND FLOOR PLAN & ENLARGED PLANS

IAD ARCHITECTS
Integrated Architecture & Design, LLC

REGISTERED ARCHITECT BRENT K. BOWLES 19691 STATE OF TEXAS

03/09/23

5310.020
AS NOTED
T.C.H.
03/09/23
A2.00

SUBMIT TO: BS CONSTRUCTION	**PROPOSAL**	SHIP TO: **Calhoun County Combined Dispatch Facility**
MAILING ADDRESS: **207 Farenthold St.**		ADDRESS: **312 West Live Oak St.**
PHYS. ADDRESS: **207 Farenthold St.**	EL CAMPO CARPET ONE	
CITY,STATE, ZIP: **El Campo, TX 77437**		CITY: **Port Lavaca, TX 77979**
PHONE: **(979) 543-2696**		SUBMITTED BY: **Brian Svetlik**
CELL PHONE: **(979) 637-0427**	**P.O. Box 1359 / 2371 E. Jackson St.** **El Campo, Tx 77437** **(979) 541-5600**	PROPOSAL DATE: **7/3/2024**

	PRODUCT / WORK DESCRIPTION / AREAS	AMOUNT
4	**SWF Contract 1" Aluminum Blinds** - Color **Brushed Pewter-756**. Installed in 4 Interior Windows (F) in Dispatch Control Room	**$798.00**
	Installation & Travel	**$150.00**
	Cost has increased since previous order due to the new ANSI/WCMA A100.1-2022 Standard for Window Covering Products regulation that went into effect on June 1, 2024.	
ALL MATERIAL IS GUARANTEED TO BE AS SPECIFIED, AND THE ABOVE WORK TO BE PERFORMED IN ACCORDANCE WITH THE DRAWINGS AND SPECIFICATIONS SUBMITTED FOR ABOVE WORK AND COMPLETED IN A SUBSTANTIAL WORKMANLIKE MANNER FOR THE SUM OF:	**SALES TAX**	**EXEMPT**
	TOTAL	**$948.00**

WITH PAYMENTS TO BE MADE AS FOLLOWS: 1/2 Draw, Balance due upon completion.

ACCEPTANCE OF PROPOSAL

THE ABOVE PRICES, SPECIFICATIONS AND CONDITIONS ARE SATISFACTORY AND ARE HEREBY ACCEPTED.
YOU ARE AUTHORIZED TO DO THE WORK AS SPECIFIED.
PAYMENTS WILL BE MADE AS OUTLINED ABOVE.

SIGNATURE ________ DATE 7-24-2024

WCMA

WINDOW COVERING
MANUFACTURERS
ASSOCIATION

Contact: Paul Nathanson, 202-828-1714
Paul.Nathanson@Bracewell.com

U.S. Court of Appeals Vacates Consumer Product Safety Commission Rule on Custom Window Coverings

September 12, 2023 – The Window Covering Manufacturers Association (WCMA) achieved a resounding victory in its lawsuit challenging the Consumer Product Safety Commission's (CPSC) rule, A *Safety Standard for Operating Cords on Custom Windows.* The U.S. Court of Appeals for the D.C. Circuit today unanimously ruled in favor of granting the WCMA's petition for review, vacating the CPSC's rule, and remanding the matter to the CPSC.

WCMA filed a lawsuit on November 30, 2022 challenging the CPSC's rule because the rule does not substantively advance child safety and ignores the fact that safety incidents have steadily declined since the voluntary standard has been in effect. The court agreed with WCMA that CPSC failed to provide an opportunity to comment on the underlying incident data, conducted a flawed cost-benefit analysis that ignored the enormous harm that the rule would have caused the multibillion-dollar custom window coverings industry, and selected an arbitrary effective date for the rule.

The window covering industry will continue to be required to meet the provisions of the voluntary window covering safety standard, ANSI/WCMA A100.1-2018. The 2022 revised, updated window covering standard, ANSI/WCMA A100.1-2022, has been approved by ANSI. The compliance date for the new standard for all companies manufacturing, distributing or selling window covering products in the U.S. is June 1, 2024. The 2022 updated standard will require the vast majority of all window covering products sold in the United States to be cordless or to have inaccessible or short cords. The revised, updated safety standard strengthens window-covering safety by eliminating the use of free hanging operating cords, free hanging tilt cords, and multiple cord connectors on all made-to-order custom window covering products.

The industry's voluntary standard has been a success and has significantly decreased incidents and improved product safety. Industry members have always considered compliance with the standard to be mandatory, and CPSC acknowledges that there is substantial compliance with the standard. Despite that success, the CPSC promulgated its new mandatory rule, circumventing the process envisioned under the CPSA.

The Case Number is D.C. Cir. No. 22-1300. The Court's Opinion *Window Covering Manufacturers Association v. Consumer Product Safety Commission* can be found here.

###

About WCMA

The Window Covering Manufacturers Association (WCMA) represents the interests of the window covering industry manufacturers, fabricators and assemblers. Industry products include blinds, shades, shutters, curtains, curtain rods, drapes, drapery hardware and other window treatments. Visit us on the web at www.wcmanet.com.

355 Lexington Avenue, 17th Floor
New York, NY 10017-6603
Phone: (212) 297-2122
Fax: (212) 370-9047

Debbie Vickery

From: demi.cabrera@calhouncotx.org (demi.cabrera) <demi.cabrera@calhouncotx.org>
Sent: Wednesday, July 24, 2024 1:40 PM
To: Debbie.Vickery@calhouncotx.org
Subject: BLS Changer Order
Attachments: BLS - Changer Order #11.pdf

Here you go ☺

Demi Cabrera
Calhoun County
Assistant Auditor
361-553-4613
361-553-4614 (fax)

Calhoun County Texas

CHANGE ORDER

No. **Eleven (11)**

PROJECT **CALHOUN COUNTY COMBINED DISPATCH FACILITY**

DATE OF ISSUANCE 07/18/24 EFFECTIVE DATE 07/24/24

OWNER **CALHOUN COUNTY**

OWNER's Contract No. N/A

CONTRACTOR **BLS CONSTRUCTION, INC.** ENGINEER **G & W ENGINEERS, INC.**
Job# 5310.020

You are directed to make the following changes in the Contract Documents.

Reason for Change Order: Interior Room Signage Allowance No. 2 has been omitted and credited to Allowance No. 1 increasing it from $35,000 to $40,000 (see below). REF: BLS attached Proposal Requests: No. 11 credited $350.00 to direct contract amount; No. 12 for $0.00; No. 13 for $853.52; No. 14 for $2,226.81; No. 15 for $964.01 and No. 16 for $1,068.87 for a total $5,113.21 towards the Contingency Budget. Added 50 additional days due to weather, manufacturing delay and to complete punch list.

Attachments (List documents supporting change) **BLS Construction Proposal Requests Listed above.**

CHANGE IN CONTRACT PRICE:	**CHANGE IN CONTRACT TIMES:**
Original Contract Price $ 1,877,350.00	Original Contract Times Substantial Completion: 280 Ready for final payment: May 27, 2024 days or dates
Contract changes from previous Change Orders No. 1 to No. 2 $ 12,187.30 Original Contingency Allowance Budget $35,000.00 Change Order 11 increase to Allowance 1 $5,000.00 New Allowance Budget Price $40,000.00	Net changes from previous Change Orders No. 1 to No. 10 37 Days days
Changes to Cont. Allowance from Previous C.O. No. 3 to 10 $30,882.49 Allowance Budget Prior to this Change Order $4,117.51 C.O. No. 11 approved amount $5,113.21	Net Cont. Allowance Changes from C.O. Numbers 3 to 11 $35,995.70 New Contingency Allowance Budget $4,004.30
Contract Price prior to this Change Order $ 1,889,537.30	Contract Times prior to this Change Order Substantial Completion: 317 Ready for final payment: July 3, 2024 days or dates
Net ~~Increase~~ (decrease) of this Change Order $ (350.00)	Net Increase ~~(decrease)~~ of this Change Order 50
Contract Price with all approved Change Orders $ 1,889,187.30	Contract Times with all approved Change Orders Substantial Completion: 367 Ready for final payment: August 22, 2024 days or dates

RECOMMENDED:	APPROVED:	ACCEPTED:
By: Scott P. [signature], P.E.	By: [signature]	By: [signature]
Engineer (Authorized Signature)	Owner (Authorized Signature)	Contractor (Authorized Signature)
G & W Engineers, Inc.	**Calhoun County**	**BLS Construction, Inc.**
Date: 07/18/2024	Date: 7-24-2024	Date: 7/18/2024

BLS CONSTRUCTION

FACILITIES PLANNING . DESIGN . CONSTRUCTION
207 Fahrenthold Street, El Campo, Texas 77437
Office: (979) 543-2696 . Fax: (979) 543-5006
www.blsconstruction.com

Proposal Request

Project Names: Calhoun County Dispatch Building
Location: 312 W Live Oak St, Port Lavaca, TX.

Contractor: BLS Construction
Address: 207 Fahrenthold, El Campo, Texas 77437

PPA No.:
Proposal Request No.: 11
Date: 5.24.2024
Phone: 979.543.2696

The Contractor is hereby directed to make the following changes in the Contract:

ITEM NO.	DESCRIPTION/UNIT BREAKDOWN/UNIT COSTS (Indicate Critical Path Schedule impact for each Item)	COST (Indicate + or -)
	Credit for (2) trees with 2" caliber, 5' in height	
1	Trees (2) - $125.00	$ (250.00)
2	Installation (2) - $50.00	$ (100.00)
	SUBTOTAL FROM ATTACHED SHEETS (IF ANY)	$ (350.00)
	TOTAL COST (This Change Order Only) =_	$ (350.00)

Change in Contract Duration/Time by This Change Order: (No Change) (Increase) (Decrease) BY (0) CALENDER DAYS.

NEW CONTRACT COMPLETION DATE: No change

Signature-Owner — Date: 7-24-2024

Heather Reese
Signature-BLS Construction — Date: 5.24.2024

FACILITIES PLANNING . DESIGN . CONSTRUCTION
207 Fahrenthold Street, El Campo, Texas 77437
Office: (979) 543-2696 . Fax: (979) 543-5006
www.blsconstruction.com

Proposal Request

Project Names: Calhoun County Dispatch Building
Location: 312 W Live Oak St. Port Lavaca, TX.

Contractor: BLS Construction
Address: 207 Fahrenthold, El Campo, Texas 77437

PPA No.:
Proposal Request No.: 12
Date: 7.18.2024 R
Phone: 979.543.2696

The Contractor is hereby directed to make the following changes in the Contract:

ITEM NO.	DESCRIPTION/UNIT BREAKDOWN/UNIT COSTS (Indicate Critical Path Schedule impact for each item)	COST (Indicate + or -)
1	Add tile to the ceilings in the showers (2) *Includes labor and materials*	No Charge
	SUBTOTAL FROM ATTACHED SHEETS (IF ANY)	$0.00
	Overhead & Profit @ __10%__ =_	$ -
	P&P Bond @ __2.5%__ =_	$ -
	TOTAL COST (This Change Order Only) =_	$ -

Change in Contract Duration/Time by This Change Order: (No Change) (Increase) (Decrease) BY ___(0)___ CALENDER DAYS.

NEW CONTRACT COMPLETION DATE: No change

Signature-Owner 7-24-2024
Date

Heather Reese
Signature-BLS Construction 7.18.2024 R
Date

CHANGE/ADD-ON 2

SUBMIT TO: BIS CONSTRUCTION

MAILING ADDRESS: 207 Farenthold St.

PHYS. ADDRESS: 207 Farenthold St.

CITY,STATE, ZIP: El Campo, TX 77437

PHONE: (979) 543-2696

CELL PHONE: (979) 637-0427

EL CAMPO CARPET ONE

P.O. Box 1359 / 2371 E. Jackson St.
El Campo, Tx 77437
(979) 541-5600

SHIP TO: Calhoun County Combined Dispatch Facility

ADDRESS: 312 West Live Oak St.

CITY: Port Lavaca, TX 77979

SUBMITTED BY: Brian Svetlik

CHANGE ORDER DATE: 6/5/2024

	PRODUCT / WORK DESCRIPTION / AREAS	AMOUNT
	Volume 1.0 6x6 Tile - Sonic White(VL75), setting material, grout & installation on ceilings of Showers in rooms 105 & 106	$997.05

ALL MATERIAL IS GUARANTEED TO BE AS SPECIFIED, AND THE ABOVE WORK TO BE PERFORMED IN ACCORDANCE WITH THE DRAWINGS AND SPECIFICATIONS SUBMITTED FOR ABOVE WORK AND COMPLETED IN A SUBSTANTIAL WORKMANLIKE MANNER FOR THE SUM OF:

SALES TAX	EXEMPT
ADD-ON TOTAL	**$997.05**

WITH PAYMENTS TO BE MADE AS FOLLOWS: 1/2 Draw, Balance due upon completion.

ACCEPTANCE OF PROPOSAL

THE ABOVE PRICES, SPECIFICATIONS AND CONDITIONS ARE SATISFACTORY AND ARE HEREBY ACCEPTED.
YOU ARE AUTHORIZED TO DO THE WORK AS SPECIFIED.
PAYMENTS WILL BE MADE AS OUTLINED ABOVE.

SIGNATURE Joy Janak

DATE 6.6.2024

BLS CONSTRUCTION

FACILITIES PLANNING . DESIGN . CONSTRUCTION
207 Fahrenthold Street, El Campo, Texas 77437
Office: (979) 543-2696 . Fax: (979) 543-5006
www.blsconstruction.com

Proposal Request

Project Names: Calhoun County Dispatch Building
Location: 312 W Live Oak St., Port Lavaca, Tx

Contractor: BLS Construction
Address: 207 Fahrenthold, El Campo, Texas 77437

PPA No.:
Proposal Request No.: 13
Date: 7.17.2024
Phone: 979.543.2696

The Contractor is hereby directed to make the following changes in the Contract:

ITEM NO.	DESCRIPTION/UNIT BREAKDOWN/UNIT COSTS (Indicate Critical Path Schedule impact for each Item)		COST (Indicate + or -)
1	Additional plumbing for installation of ice-machine-not is scope of work		$ 757.00
	Includes labor and materials		
	SUBTOTAL FROM ATTACHED SHEETS (IF ANY)	$	757.00
	Overhead & Profit @ __10%__ =_	$	75.70
	P&P Bond @ __2.5%__ =_	$	20.82
	TOTAL COST (This Change Order Only) =_	$	853.52

Change in Contract Duration/Time by This Change Order: (No Change) (Increase) (Decrease) BY ___(0)___ CALENDER DAYS.

NEW CONTRACT COMPLETION DATE: No change

Signature-Owner _______ Date 7-24-2024

Signature-BLS Construction Joy Janak _______ Date 7.17.2024

PROPOSAL

Kotlar Plumbing Company
Larry Kotlar
M18271
203 S. East
Edna, Texas 77957
361-782-3536 361-782-2288

Proposal Submitted to: BLS
Job Name: Calhoun Dispatch

Date: 7/17/2024

Run a 1'' PVC drain line from the ice maker to sink drain.

Seven Hundred Fifty-Seven dollars and 00/100_____ ($757.00)

Thank you for the opportunity of working with you. Payment Due upon Completion.

All Material is guaranteed to be as specified. All work to be completed in a workmanlike manner according to standard practices. Any alteration or or deviation from above specification involving extra cost will be executed only upon written orders, and will become an extra charge over and above estimate. All agreements contingent upon strikes, accidents or delays beyond our control. Owner to carry fire, tornado and other necessary insurance. Our workers are fully covered by Workmen's Compensation Insurance._Carpenter or landscape work is to be provided by others.and not responsibility of Kotlar Plumbing.
Acceptance of Proposal - The above prices, specifications and conditions are satisfactory and are hereby accepted, you are authorized to do the work as specified. Payment will be made as outlined above.

Authorized Signature: ________________

Note: This proposal may be withdrawn by us if not accepted within 30 days.

Date of Acceptance: 7-24-2024

CONSTRUCTION

FACILITIES PLANNING . DESIGN . CONSTRUCTION
207 Fahrenthold Street, El Campo, Texas 77437
Office: (979) 543-2696 . Fax: (979) 543-5006
www.blsconstruction.com

Proposal Request

Project Names: Calhoun County Dispatch Building
Location: 312 W. Live Oak Street, Port Lavaca, Tx

Contractor: BLS Construction
Address: 207 Fahrenthold, El Campo, Texas 77437

PPA No.:
Proposal Request No.: 14
Date: 6.27.2027
Phone: 979.543.2696

The Contractor is hereby directed to make the following changes in the Contract:

ITEM NO.	DESCRIPTION/UNIT BREAKDOWN/UNIT COSTS (Indicate Critical Path Schedule impact for each Item)	COST (Indicate + or -)
1	Change door 125 to full view glass-non fire rated	$1,075.00
2	Labor to remove current door and install new door	$900.00
	SUBTOTAL FROM ATTACHED SHEETS (IF ANY)	$1,975.00
	Overhead & Profit @ __10%__ =_	$197.50
	P&P Bond @ __2.5%__ =_	$54.31
	TOTAL COST (This Change Order Only) =_	$2,226.81

Change in Contract Duration/Time by This Change Order: (No Change) (Increase) (Decrease) BY ___(0)_____ CALENDER DAYS.

NEW CONTRACT COMPLETION DATE: No change

7-24-2024

Signature-Owner Date

Joy Janak 6.27.2027

Signature-BLS Construction Date

Victoria Builder Supply Company Inc.
5301 John Stockbauer Dr, Victoria, Texas 77904
(361) 572-8929

Estimate 15470330
Job
Estimate Date 6/26/2024

Billing Address
BLS Construction
207 Fahrenthold
El Campo, TX 77437 USA

Job Address
Calhoun County Dispatch Building
312 West Live Oak Street
Port Lavaca, TX 77979 USA

Estimate Details

Added Door

Service #	Description	Quantity	Your Price	Your Total
Note	Door only, no hardware included in quote	1.00	$0.00	$0.00

Materials

Material	Description	Quantity	Your Price	Your Total
PLAM Custom	3070 x 1-3/4, LH, Full Lite Cut out with Glass and Lite Kit, Non-Fire Rated	1.00	$1,075.00	$1,075.00

Potential Savings	$0.00
Sub-Total	$1,075.00
Tax	$88.69
Total	$1,163.69

Thank you for choosing Victoria Builder Supply Company Inc.

CONSTRUCTION

FACILITIES PLANNING . DESIGN . CONSTRUCTION
207 Fahrenthold Street, El Campo, Texas 77437
Office: (979) 543-2696 . Fax: (979) 543-5006
www.blsconstruction.com

Proposal Request

Project Names: Calhoun County Dispatch Building
Location: 312 W. Live Oak St., Port Lavaca, Texas

Contractor: BLS Construction
Address: 207 Fahrenthold, El Campo, Texas 77437

PPA No.:
Proposal Request No.: 15
Date: 7.2.2024
Phone: 979.543.2696

The Contractor is hereby directed to make the following changes in the Contract:

ITEM NO.	DESCRIPTION/UNIT BREAKDOWN/UNIT COSTS (Indicate Critical Path Schedule impact for each Item)	COST (Indicate + or -)
1	Add closer to door 118	$ 495.00
2	Labor to install	$ 360.00
	Includes labor and materials	
	SUBTOTAL FROM ATTACHED SHEETS (IF ANY)	$ 855.00
	Overhead & Profit @ __10%__ =_	$ 85.50
	P&P Bond @ __2.5%__ =_	$ 23.51
	TOTAL COST (This Change Order Only) =_	$ 964.01

Change in Contract Duration/Time by This Change Order: (No Change) (Increase) (Decrease) BY __(0)__ CALENDER DAYS.

NEW CONTRACT COMPLETION DATE: No change

Signature-Owner — Date: 7-24-2024

Joy Janak
Signature-BLS Construction — Date: 7.2.2024

Victoria Builder Supply Company Inc.
5301 John Stockbauer Dr, Victoria, Texas 77904
(361) 572-8929

Estimate 15528506
Job
Estimate Date 7/2/2024

Billing Address
BLS Construction
207 Fahrenthold
El Campo, TX 77437 USA

Job Address
Calhoun County Dispatch Building
312 West Live Oak Street
Port Lavaca, TX 77979 USA

Estimate Details

Closer for Joy

Service #	Description	Quantity	Your Price	Your Total
Note	Note: Lead Time 2-3 weeks	1.00	$0.00	$0.00

Materials

Material	Description	Quantity	Your Price	Your Total
CH Custom	Closer, LCN 1461 HD FC SRI TBSRT, 689	1.00	$495.00	$495.00

Potential Savings	$0.00
Sub-Total	$495.00
~~Tax~~	~~$40.84~~
~~Total~~	~~$535.84~~

Thank you for choosing Victoria Builder Supply Company Inc.

BLS CONSTRUCTION

FACILITIES PLANNING . DESIGN . CONSTRUCTION
207 Fahrenthold Street, El Campo, Texas 77437
Office: (979) 543-2696 . Fax: (979) 543-5006
www.blsconstruction.com

Proposal Request

Project Names: **Calhoun County Dispatch Building**
Location: **312 W Live Oak Street, Port Lavaca, Tx**

Contractor: **BLS Construction**
Address: **207 Fahrenthold, El Campo, Texas 77437**

PPA No.:
Proposal Request No.: **16**
Date: **7.3.2024**
Phone: **979.543.2696**

The Contractor is hereby directed to make the following changes in the Contract:

ITEM NO.	DESCRIPTION/UNIT BREAKDOWN/UNIT COSTS (Indicate Critical Path Schedule impact for each item)	COST (Indicate + or -)
1	Add (4) blinds to room 112 - Dispatch Control Room	$ 948.00
	Includes labor and materials	
	SUBTOTAL FROM ATTACHED SHEETS (IF ANY)	$ 948.00
	Overhead & Profit @ __10%__ =	$ 94.80
	P&P Bond @ __2.5%__ =	$ 26.07
	TOTAL COST (This Change Order Only) =	$ 1,068.87

Change in Contract Duration/Time by This Change Order: (No Change) (Increase) (Decrease) BY (0) CALENDER DAYS.

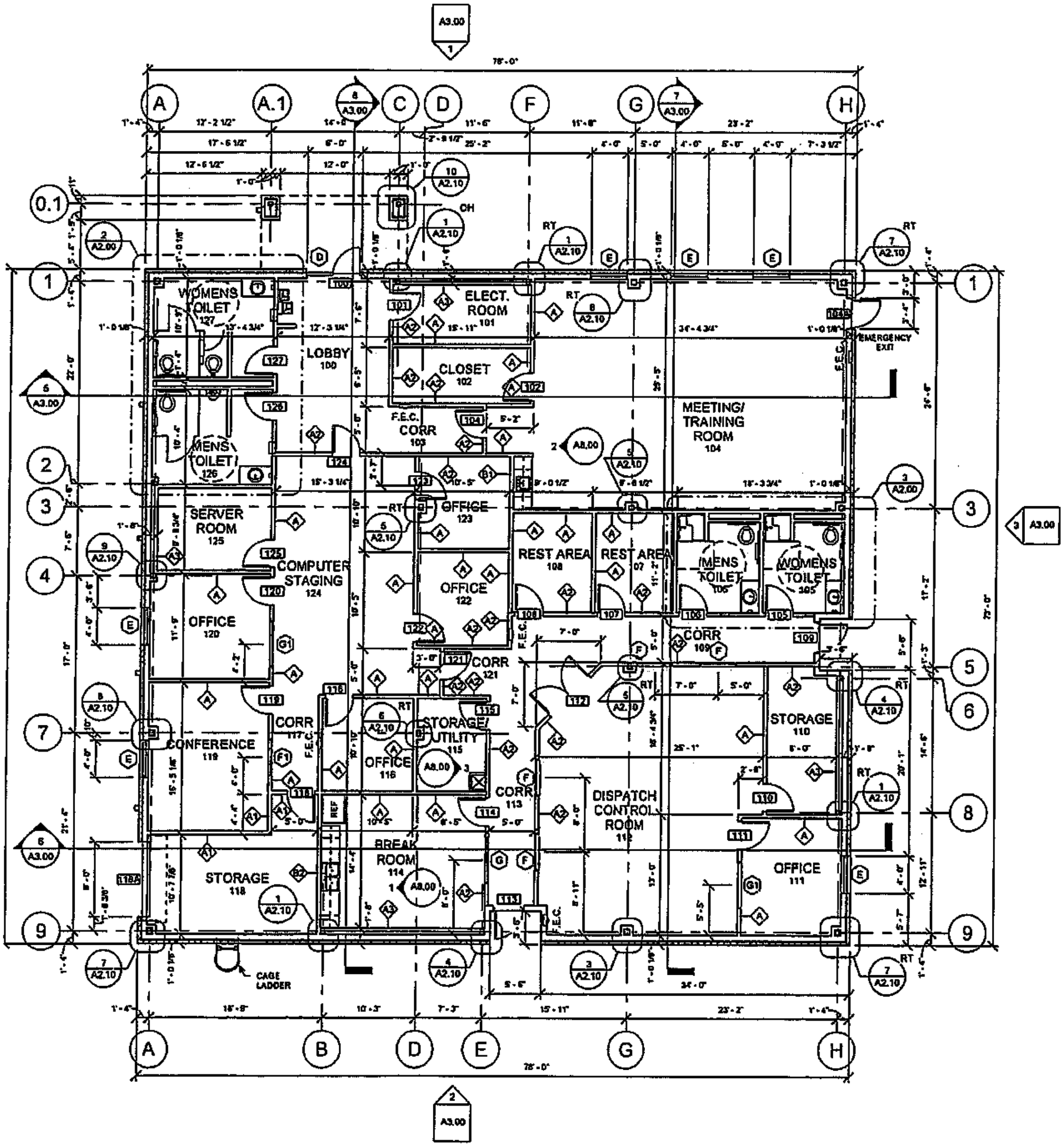
NEW CONTRACT COMPLETION DATE: No change

Signature-Owner — Date: 7-24-2024

Heather Reese
Signature-BLS Construction — Date: 7.3.2024

Type	Description
A	5/8" TYPE "X" FIRECODE GYP.BD. ON EACH SIDE OF 3 5/8" METAL STUDS TO 12" ABOVE CEILING W/3 5/8" METAL STUD BRACING @ 4'-0" O.C. BRACED ACROSS TOP OF WALLS. PROVIDE SOUND BATT INSULATION.
A1	5/8" TYPE "X" FIRECODE GYP.BD. ON EACH SIDE OF 3 5/8" METAL STUDS TO DECK. PROVIDE SOUND BATT INSULATION.
A2	5/8" TYPE "X" FIRECODE GYP.BD. ON EACH SIDE OF 3 5/8" METAL STUDS TO DECK. PROVIDE SOUND BATT INSULATION. 1 HR RATED WALL ASSEMBLY.
A3	5/8" TYPE "X" FIRECODE GYP. BD. ON ONE SIDE OF 3 5/8" METAL STUDS TO DECK.
B	5/8" TILE BACKING PANEL ON EACH SIDE OF 3 5/8" METAL STUDS TO 12" ABOVE CEILING W/3 5/8" METAL STUD BRACING @ 4'-0" O.C. BRACED ACROSS TOP OF WALLS.
B1	5/8" WATER RESISTANT GYP.BD. ON ONE SIDE & 5/8" TYPE "X" FIRECODE GYP. BD. ON OTHER SIDE OF 3 5/8" METAL STUDS TO 12" ABOVE CEILING W/3 5/8" METAL STUD BRACING @ 4'-0" O.C. BRACED ACROSS TOP OF WALLS. PROVIDE SOUND BATT INSULATION.
B2	5/8" WATER RESISTANT GYP.BD. ON ONE SIDE & 5/8" TYPE "X" FIRECODE GYP. BD. ON OTHER SIDE OF 3 5/8" METAL STUDS TO DECK. PROVIDE SOUND BATT INSULATION.
B3	5/8" WATER RESISTANT GYP.BD. ON ONE SIDE & 5/8" TYPE "X" FIRECODE GYP. BD. ON OTHER SIDE OF 3 5/8" METAL STUDS TO DECK. PROVIDE SOUND BATT INSULATION. 1 HR RATED WALL ASSEMBLY.
B4	5/8" TILE BACKING PANEL ON ONE SIDE OF 3 5/8" METAL STUDS TO 48" ABOVE CEILING W/3 5/8" METAL STUD BRACING @ 4'-0" O.C. BRACED ACROSS TOP OF WALLS. PROVIDE SOUND BATT INSULATION.
B5	5/8" WATER RESISTANT GYP.BD. ON ONE SIDE & 5/8" TILE BACKING PANEL ON OTHER SIDE OF 3 5/8" METAL STUDS TO 48" ABOVE CEILING W/3 5/8" METAL STUD BRACING @ 4'-0" O.C. BRACED ACROSS TOP OF WALLS. PROVIDE SOUND BATT INSULATION.
B6	5/8" WATER RESISTANT GYP.BD. ON ONE SIDE & 5/8" TYPE "X" FIRECODE GYP. BD. ON OTHER SIDE OF 3 5/8" METAL STUDS TO 48" ABOVE CEILING W/3 5/8" METAL STUD BRACING @ 4'-0" O.C. BRACED ACROSS TOP OF WALLS. PROVIDE SOUND BATT INSULATION.
B7	5/8" TILE BACKING PANEL ON ONE SIDE & 5/8" TYPE "X" FIRECODE GYP. BD. ON OTHER SIDE OF 3 5/8" METAL STUDS TO 48" ABOVE CEILING W/3 5/8" METAL STUD BRACING @ 4'-0" O.C. BRACED ACROSS TOP OF WALLS. PROVIDE SOUND BATT INSULATION.

4 PARTITION TYPES
1/2" = 1'-0"



1 GROUND FLOOR PLAN
1/8" = 1'-0"

PLAN NORTH

1	9/11/23	PLUMBING CHASE REV.
C	4/24/23	PER ADDENDUM NO. 1
B	3/09/23	FOR PERMIT & BIDDING ONLY
A	2/24/23	FOR REVIEW/APPROVAL

G & W

COMBINED DISPATCH BUILDING
CALHOUN COUNTY, TEXAS
312 West Live Oak St., Port Lavaca

GROUND FLOOR PLAN & ENLARGED PLANS

IAD Integrated Architecture & Design, LLC

REGISTERED ARCHITECT BRENT K. BOWLES 19891 STATE OF TEXAS

03/09/23

5310.020
AS NOTED
T.C.H.

03/09/23
A2.00

PROPOSAL

SUBMIT TO: CONSTRUCTION

MAILING ADDRESS: 207 Farenthold St.

PHYS. ADDRESS: 207 Farenthold St.

CITY,STATE, ZIP: El Campo, TX 77437

PHONE: (979) 543-2696

CELL PHONE: (979) 637-0427

EL CAMPO CARPET ONE

P.O. Box 1359 / 2371 E. Jackson St.
El Campo, Tx 77437
(979) 541-5600

SHIP TO:
Calhoun County Combined Dispatch Facility
ADDRESS: 312 West Live Oak St.

CITY: Port Lavaca, TX 77979

SUBMITTED BY: Brian Svetlik

PROPOSAL DATE: 7/3/2024

	PRODUCT / WORK DESCRIPTION / AREAS	AMOUNT
4	SWF Contract 1" Aluminum Blinds - Color Brushed Pewter-756. Installed in 4 Interior Windows (F) in Dispatch Control Room	$798.00
	Installation & Travel	$150.00
	Cost has increased since previous order due to the new ANSI/WCMA A100.1-2022 Standard for Window Covering Products regulation that went into effect on June 1, 2024.	

ALL MATERIAL IS GUARANTEED TO BE AS SPECIFIED, AND THE ABOVE WORK TO BE PERFORMED IN ACCORDANCE WITH THE DRAWINGS AND SPECIFICATIONS SUBMITTED FOR ABOVE WORK AND COMPLETED IN A SUBSTANTIAL WORKMANLIKE MANNER FOR THE SUM OF:	SALES TAX	EXEMPT
	TOTAL	$948.00

WITH PAYMENTS TO BE MADE AS FOLLOWS: 1/2 Draw, Balance due upon completion.

ACCEPTANCE OF PROPOSAL

THE ABOVE PRICES, SPECIFICATIONS AND CONDITIONS ARE SATISFACTORY AND ARE HEREBY ACCEPTED.
YOU ARE AUTHORIZED TO DO THE WORK AS SPECIFIED.
PAYMENTS WILL BE MADE AS OUTLINED ABOVE.

SIGNATURE ________ DATE 7-24-2024

WCMA

WINDOW COVERING
MANUFACTURERS
ASSOCIATION

Contact: Paul Nathanson, 202-828-1714
Paul.Nathanson@Bracewell.com

U.S. Court of Appeals Vacates Consumer Product Safety Commission Rule on Custom Window Coverings

September 12, 2023 – The Window Covering Manufacturers Association (WCMA) achieved a resounding victory in its lawsuit challenging the Consumer Product Safety Commission's (CPSC) rule, A *Safety Standard for Operating Cords on Custom Windows*. The U.S. Court of Appeals for the D.C. Circuit today unanimously ruled in favor of granting the WCMA's petition for review, vacating the CPSC's rule, and remanding the matter to the CPSC.

WCMA filed a lawsuit on November 30, 2022 challenging the CPSC's rule because the rule does not substantively advance child safety and ignores the fact that safety incidents have steadily declined since the voluntary standard has been in effect. The court agreed with WCMA that CPSC failed to provide an opportunity to comment on the underlying incident data, conducted a flawed cost-benefit analysis that ignored the enormous harm that the rule would have caused the multibillion-dollar custom window coverings industry, and selected an arbitrary effective date for the rule.

The window covering industry will continue to be required to meet the provisions of the voluntary window covering safety standard, ANSI/WCMA A100.1-2018. The 2022 revised, updated window covering standard, ANSI/WCMA A100.1-2022, has been approved by ANSI. The compliance date for the new standard for all companies manufacturing, distributing or selling window covering products in the U.S. is June 1, 2024. The 2022 updated standard will require the vast majority of all window covering products sold in the United States to be cordless or to have inaccessible or short cords. The revised, updated safety standard strengthens window-covering safety by eliminating the use of free hanging operating cords, free hanging tilt cords, and multiple cord connectors on all made-to-order custom window covering products.

The industry's voluntary standard has been a success and has significantly decreased incidents and improved product safety. Industry members have always considered compliance with the standard to be mandatory, and CPSC acknowledges that there is substantial compliance with the standard. Despite that success, the CPSC promulgated its new mandatory rule, circumventing the process envisioned under the CPSA.

The Case Number is D.C. Cir. No. 22-1300. The Court's Opinion *Window Covering Manufacturers Association v. Consumer Product Safety Commission* can be found here.

###

About WCMA

The Window Covering Manufacturers Association (WCMA) represents the interests of the window covering industry manufacturers, fabricators and assemblers. Industry products include blinds, shades, shutters, curtains, curtain rods, drapes, drapery hardware and other window treatments. Visit us on the web at www.wcmanet.com.

355 Lexington Avenue, 17th Floor
New York, NY 10017-6603
Phone: (212) 297-2122
Fax: (212) 370-9047

10

10. Consider and take necessary action on resolution for the Texas Department of Transportation Aviation Grant of $150,000 for the AWOS System. (VLL)

RESULT:	**APPROVED [UNANIMOUS]**
MOVER:	Vern Lyssy, Commissioner Pct 2
SECONDER:	David Hall, Commissioner Pct 1
AYES:	Judge Meyer, Commissioner Hall, Lyssy, Behrens, Reese

Vern Lyssy

Calhoun County Commissioner, Precinct #2

5812 FM 1090
Port Lavaca, TX 77979

(361) 552-9656
Fax (361) 553-6664

July 18, 2024

Honorable Richard Meyer
Calhoun County Judge
211 S. Ann
Port Lavaca, TX 77979

RE: AGENDA ITEM

Dear Judge Meyer:

Please place the following item on the next Commissioners' Court Agenda

- Consider and take necessary action on resolution for the Texas Department of Transportation Aviation Grant of $150,000 for the AWOS System.

Sincerely,

Vern Lyssy

VL/lj

7/24/2024

Richard H. Meyer
County Judge

David Hall, Commissioner, Precinct 1
Vern Lyssy, Commissioner, Precinct 2
Joel Behrens, Commissioner, Precinct 3
Gary Reese, Commissioner, Precinct 4

RESOLUTION of the COMMISSIONERS' COURT of CALHOUN COUNTY, TEXAS

RESOLUTION for AWOS Grant

WHEREAS, CALHOUN COUNTY desires to install an automated weather observing system at the CALHOUN COUNTY AIRPORT; and

WHEREAS, the total project cost is estimated to be $150,000; and

WHEREAS, CALHOUN COUNTY hereby offers 10% of project costs to match 90% state funds, currently estimated to be $15,000 in local funds; and
WHEREAS, local funds will be available to meet project expenditures; and
WHEREAS, CALHOUN COUNTY agrees to operate and maintain the installed automated weather observing system for the useful life of the asset; and
WHEREAS, CALHOUN COUNTY intends to request financial assistance from the Texas Department of Transportation for installation of the automated weather observing system for these improvements; and

NOW, THEREFORE, BE IT RESOLVED, that CALHOUN COUNTY hereby directs COMMISSIONER VERN LYSSY to execute on behalf of CALHOUN COUNTY, at the appropriate time, and with the appropriate authorizations of this governing body, all contracts and agreements with the Texas Department of Transportation, and such other parties as shall be necessary and appropriate for the implementation of the improvements to CALHOUN COUNTY AIRPORT

Adopted this 24th day of July, 2024.

Richard H Meyer
County Judge

Attest:

Deputy County Clerk

11

11. Consider and take necessary action to purchase Lot 9 Block 27 of Port Lavaca Original Townsite (312 S Ann St). Make check payable in the amount of $24,400 to Momentum Title and authorize the County Judge to sign. (RHM)

Judge stated there was a typo and the amount should read $25,400

RESULT:	**APPROVED [UNANIMOUS]**
MOVER:	David Hall, Commissioner Pct 1
SECONDER:	Joel Behrens, Commissioner Pct 3
AYES:	Judge Meyer, Commissioner Hall, Lyssy, Behrens, Reese

Information About Brokerage Services

11-2-2015

Texas law requires all real estate license holders to give the following information about brokerage services to prospective buyers, tenants, sellers and landlords.

TYPES OF REAL ESTATE LICENSE HOLDERS:

- **A BROKER** is responsible for all brokerage activities, including acts performed by sales agents sponsored by the broker.
- **A SALES AGENT** must be sponsored by a broker and works with clients on behalf of the broker.

A BROKER'S MINIMUM DUTIES REQUIRED BY LAW (A client is the person or party that the broker represents):

- Put the interests of the client above all others, including the broker's own interests;
- Inform the client of any material information about the property or transaction received by the broker;
- Answer the client's questions and present any offer to or counter-offer from the client; and
- Treat all parties to a real estate transaction honestly and fairly.

A LICENSE HOLDER CAN REPRESENT A PARTY IN A REAL ESTATE TRANSACTION:

AS AGENT FOR OWNER (SELLER/LANDLORD): The broker becomes the property owner's agent through an agreement with the owner, usually in a written listing to sell or property management agreement. An owner's agent must perform the broker's minimum duties above and must inform the owner of any material information about the property or transaction known by the agent, including information disclosed to the agent or subagent by the buyer or buyer's agent.

AS AGENT FOR BUYER/TENANT: The broker becomes the buyer/tenant's agent by agreeing to represent the buyer, usually through a written representation agreement. A buyer's agent must perform the broker's minimum duties above and must inform the buyer of any material information about the property or transaction known by the agent, including information disclosed to the agent by the seller or seller's agent.

AS AGENT FOR BOTH - INTERMEDIARY: To act as an intermediary between the parties the broker must first obtain the written agreement of *each party* to the transaction. The written agreement must state who will pay the broker and, in conspicuous bold or underlined print, set forth the broker's obligations as an intermediary. A broker who acts as an intermediary:

- Must treat all parties to the transaction impartially and fairly;
- May, with the parties' written consent, appoint a different license holder associated with the broker to each party (owner and buyer) to communicate with, provide opinions and advice to, and carry out the instructions of each party to the transaction.
- Must not, unless specifically authorized in writing to do so by the party, disclose:
  - that the owner will accept a price less than the written asking price;
  - that the buyer/tenant will pay a price greater than the price submitted in a written offer; and
  - any confidential information or any other information that a party specifically instructs the broker in writing not to disclose, unless required to do so by law.

AS SUBAGENT: A license holder acts as a subagent when aiding a buyer in a transaction without an agreement to represent the buyer. A subagent can assist the buyer but does not represent the buyer and must place the interests of the owner first.

TO AVOID DISPUTES, ALL AGREEMENTS BETWEEN YOU AND A BROKER SHOULD BE IN WRITING AND CLEARLY ESTABLISH:

- The broker's duties and responsibilities to you, and your obligations under the representation agreement.
- Who will pay the broker for services provided to you, when payment will be made and how the payment will be calculated.

LICENSE HOLDER CONTACT INFORMATION: This notice is being provided for information purposes. It does not create an obligation for you to use the broker's services. Please acknowledge receipt of this notice below and retain a copy for your records.

Name	License No.	Email	Phone
RE/MAX Land & Homes on the Bay Licensed Broker/Broker Firm Name or Primary Assumed Business Name	589279	Veronica.mccants@remax.net	(361)552-5200
Veronica McCants Designated Broker of Firm	522117	veronica.mccants@remax.net	(361)935-4663
Sarah Korczynski Licensed Supervisor of Sales Agent/ Associate	522118	sarah@victoriatxrealestate.com	(361)920-9567
Dallas Franklin Sales Agent/Associate's Name	571024	dallasfranklin@remax.net	(361)230-2267

Buyer/Tenant/Seller/Landlord Initials ______ Date ______

Regulated by the Texas Real Estate Commission **Information available at www.trec.texas.gov**

PROMULGATED BY THE TEXAS REAL ESTATE COMMISSION (TREC) 11-07-2022

ONE TO FOUR FAMILY RESIDENTIAL CONTRACT (RESALE)

NOTICE: Not For Use For Condominium Transactions

1. PARTIES: The parties to this contract are OVATION SERVICES (Seller) and CALHOUN COUNTY (Buyer). Seller agrees to sell and convey to Buyer and Buyer agrees to buy from Seller the Property defined below.

2. PROPERTY: The land, improvements and accessories are collectively referred to as the Property (Property).
   A. LAND: Lot 9 Block 27, PORT LAVACA ORIGINAL TOWNSITE Addition, City of PORT LAVACA, County of CALHOUN, Texas, known as 312 S ANN 77979 (address/zip code), or as described on attached exhibit.
   B. IMPROVEMENTS: The house, garage and all other fixtures and improvements attached to the above-described real property, including without limitation, the following permanently installed and built-in items, if any: all equipment and appliances, valances, screens, shutters, awnings, wall-to-wall carpeting, mirrors, ceiling fans, attic fans, mail boxes, television antennas, mounts and brackets for televisions and speakers, heating and air-conditioning units, security and fire detection equipment, wiring, plumbing and lighting fixtures, chandeliers, water softener system, kitchen equipment, garage door openers, cleaning equipment, shrubbery, landscaping, outdoor cooking equipment, and all other property attached to the above described real property.
   C. ACCESSORIES: The following described related accessories, if any: window air conditioning units, stove, fireplace screens, curtains and rods, blinds, window shades, draperies and rods, door keys, mailbox keys, above ground pool, swimming pool equipment and maintenance accessories, artificial fireplace logs, security systems that are not fixtures, and controls for: (i) garage doors, (ii) entry gates, and (iii) other improvements and accessories. "Controls" includes Seller's transferable rights to the (i) software and applications used to access and control improvements or accessories, and (ii) hardware used solely to control improvements or accessories.
   D. EXCLUSIONS: The following improvements and accessories will be retained by Seller and must be removed prior to delivery of possession: ______
   E. RESERVATIONS: Any reservation for oil, gas, or other minerals, water, timber, or other interests is made in accordance with an attached addendum.

3. SALES PRICE:
   A. Cash portion of Sales Price payable by Buyer at closing .... $ 25,000.00
   The term "Cash portion of the Sales Price" does not include proceeds from borrowing of any kind or selling other real property except as disclosed in this contract.
   B. Sum of all financing described in the attached: ☐ Third Party Financing Addendum, ☐ Loan Assumption Addendum, ☐ Seller Financing Addendum .... $ ______
   C. Sales Price (Sum of A and B) .... $ 25,000.00

4. LEASES: Except as disclosed in this contract, Seller is not aware of any leases affecting the Property. After the Effective Date, Seller may not, without Buyer's written consent, create a new lease, amend any existing lease, or convey any interest in the Property. (Check all applicable boxes)
   ☐ A. RESIDENTIAL LEASES: The Property is subject to one or more residential leases and the Addendum Regarding Residential Leases is attached to this contract.
   ☐ B. FIXTURE LEASES: Fixtures on the Property are subject to one or more fixture leases (for example, solar panels, propane tanks, water softener, security system) and the Addendum Regarding Fixture Leases is attached to this contract.
   ☐ C. NATURAL RESOURCE LEASES: "Natural Resource Lease" means an existing oil and gas, mineral, water, wind, or other natural resource lease affecting the Property to which Seller is a party.
   ☐ (1) Seller has delivered to Buyer a copy of all the Natural Resource Leases.
   ☐ (2) Seller has not delivered to Buyer a copy of all the Natural Resource Leases. Seller shall provide to Buyer a copy of all the Natural Resource Leases within 3 days after the Effective Date. Buyer may terminate the contract within ____ days after the date the Buyer receives all the Natural Resource Leases and the earnest money shall be refunded to Buyer.

5. EARNEST MONEY AND TERMINATION OPTION:

A. DELIVERY OF EARNEST MONEY AND OPTION FEE: Within 3 days after the Effective Date, Buyer must deliver to Momentum Title (Escrow Agent) at 20333 State Hwy 249,Suite 510 Houston Tx 77070 (address): $ 500.00 as earnest money and $ ______ as the Option Fee. The earnest money and Option Fee shall be made payable to Escrow Agent and may be paid separately or combined in a single payment.

(1) Buyer shall deliver additional earnest money of $ ______ to Escrow Agent within ______ days after the Effective Date of this contract.

(2) If the last day to deliver the earnest money, Option Fee, or the additional earnest money falls on a Saturday, Sunday, or legal holiday, the time to deliver the earnest money, Option Fee, or the additional earnest money, as applicable, is extended until the end of the next day that is not a Saturday, Sunday, or legal holiday.

(3) The amount(s) Escrow Agent receives under this paragraph shall be applied first to the Option Fee, then to the earnest money, and then to the additional earnest money.

(4) Buyer authorizes Escrow Agent to release and deliver the Option Fee to Seller at any time without further notice to or consent from Buyer, and releases Escrow Agent from liability for delivery of the Option Fee to Seller. The Option Fee will be credited to the Sales Price at closing.

RC for Buyer DH

B. TERMINATION OPTION: For nominal consideration, the receipt of which Seller acknowledges, and Buyer's agreement to pay the Option Fee within the time required, Seller grants Buyer the unrestricted right to terminate this contract by giving notice of termination to Seller within ______ days after the Effective Date of this contract (Option Period). Notices under this paragraph must be given by 5:00 p.m. (local time where the Property is located) by the date specified. If Buyer gives notice of termination within the time prescribed: (i) the Option Fee will not be refunded and Escrow Agent shall release any Option Fee remaining with Escrow Agent to Seller; and (ii) any earnest money will be refunded to Buyer.

C. FAILURE TO TIMELY DELIVER EARNEST MONEY: If Buyer fails to deliver the earnest money within the time required, Seller may terminate this contract or exercise Seller's remedies under Paragraph 15, or both, by providing notice to Buyer before Buyer delivers the earnest money.

D. FAILURE TO TIMELY DELIVER OPTION FEE: If no dollar amount is stated as the Option Fee or if Buyer fails to deliver the Option Fee within the time required, Buyer shall not have the unrestricted right to terminate this contract under this paragraph 5.

E. TIME: Time is of the essence for this paragraph and strict compliance with the time for performance is required.

6. TITLE POLICY AND SURVEY:

RC for Buyer DH

A. TITLE POLICY: Seller shall furnish to Buyer at [x] Seller's [ ] Buyer's expense an owner policy of title insurance (Title Policy) issued by Momentum Title (Title Company) in the amount of the Sales Price, dated at or after closing, insuring Buyer against loss under the provisions of the Title Policy, subject to the promulgated exclusions (including existing building and zoning ordinances) and the following exceptions:

(1) Restrictive covenants common to the platted subdivision in which the Property is located.
(2) The standard printed exception for standby fees, taxes and assessments.
(3) Liens created as part of the financing described in Paragraph 3.
(4) Utility easements created by the dedication deed or plat of the subdivision in which the Property is located.
(5) Reservations or exceptions otherwise permitted by this contract or as may be approved by Buyer in writing.
(6) The standard printed exception as to marital rights.
(7) The standard printed exception as to waters, tidelands, beaches, streams, and related matters.
(8) The standard printed exception as to discrepancies, conflicts, shortages in area or boundary lines, encroachments or protrusions, or overlapping improvements:
[ ] (i) will not be amended or deleted from the title policy; or
[ ] (ii) will be amended to read, "shortages in area" at the expense of [ ] Buyer [ ] Seller.
(9) The exception or exclusion regarding minerals approved by the Texas Department of Insurance.

B. COMMITMENT: Within 20 days after the Title Company receives a copy of this contract, Seller shall furnish to Buyer a commitment for title insurance (Commitment) and, at Buyer's expense, legible copies of restrictive covenants and documents evidencing exceptions in the Commitment (Exception Documents) other than the standard printed exceptions. Seller authorizes the Title Company to deliver the Commitment and Exception Documents to Buyer at Buyer's address shown in Paragraph 21. If the Commitment and Exception Documents are not delivered to Buyer within the specified time, the time for delivery will be automatically extended up to 15 days or 3 days before the Closing Date, whichever is earlier. If the Commitment and Exception Documents are not delivered within the time required, Buyer may terminate this contract and the earnest money will be refunded to Buyer.

C. SURVEY: The survey must be made by a registered professional land surveyor acceptable to the Title Company and Buyer's lender(s). (Check one box only)

☐ (1) Within _____ days after the Effective Date of this contract, Seller shall furnish to Buyer and Title Company Seller's existing survey of the Property and a Residential Real Property Affidavit promulgated by the Texas Department of Insurance (T-47 Affidavit). If Seller fails to furnish the existing survey or affidavit within the time prescribed, Buyer shall obtain a new survey at Seller's expense no later than 3 days prior to Closing Date. If the existing survey or affidavit is not acceptable to Title Company or Buyer's lender(s), Buyer shall obtain a new survey at ☐Seller's ☐Buyer's expense no later than 3 days prior to Closing Date.

☐ (2) Within _____ days after the Effective Date of this contract, Buyer shall obtain a new survey at Buyer's expense. Buyer is deemed to receive the survey on the date of actual receipt or the date specified in this paragraph, whichever is earlier.

☐ (3) Within _____ days after the Effective Date of this contract, Seller, at Seller's expense shall furnish a new survey to Buyer.

D. OBJECTIONS: Buyer may object in writing to defects, exceptions, or encumbrances to title: disclosed on the survey other than items 6A(1) through (7) above; disclosed in the Commitment other than items 6A(1) through (9) above; or which prohibit the following use or activity: ____.

Buyer must object the earlier of (i) the Closing Date or (ii) _________ days after Buyer receives the Commitment, Exception Documents, and the survey. Buyer's failure to object within the time allowed will constitute a waiver of Buyer's right to object; except that the requirements in Schedule C of the Commitment are not waived by Buyer. Provided Seller is not obligated to incur any expense, Seller shall cure any timely objections of Buyer or any third party lender within 15 days after Seller receives the objections (Cure Period) and the Closing Date will be extended as necessary. If objections are not cured within the Cure Period, Buyer may, by delivering notice to Seller within 5 days after the end of the Cure Period: (i) terminate this contract and the earnest money will be refunded to Buyer; or (ii) waive the objections. If Buyer does not terminate within the time required, Buyer shall be deemed to have waived the objections. If the Commitment or survey is revised or any new Exception Document(s) is delivered, Buyer may object to any new matter revealed in the revised Commitment or survey or new Exception Document(s) within the same time stated in this paragraph to make objections beginning when the revised Commitment, survey, or Exception Document(s) is delivered to Buyer.

E. TITLE NOTICES:

(1) ABSTRACT OR TITLE POLICY: Broker advises Buyer to have an abstract of title covering the Property examined by an attorney of Buyer's selection, or Buyer should be furnished with or obtain a Title Policy. If a Title Policy is furnished, the Commitment should be promptly reviewed by an attorney of Buyer's choice due to the time limitations on Buyer's right to object.

(2) MEMBERSHIP IN PROPERTY OWNERS ASSOCIATION(S): The Property ☐is ☒is not subject to mandatory membership in a property owners association(s). If the Property is subject to mandatory membership in a property owners association(s), Seller notifies Buyer under §5.012, Texas Property Code, that, as a purchaser of property in the residential community identified in Paragraph 2A in which the Property is located, you are obligated to be a member of the property owners association(s). Restrictive covenants governing the use and occupancy of the Property and all dedicatory instruments governing the establishment, maintenance, or operation of this residential community have been or will be recorded in the Real Property Records of the county in which the Property is located. Copies of the restrictive covenants and dedicatory instruments may be obtained from the county clerk. <u>You are obligated to pay assessments to the property owners association(s). The amount of the assessments is subject to change. Your failure to pay the assessments could result in enforcement of the association's lien on and the foreclosure of the Property.</u>

Section 207.003, Property Code, entitles an owner to receive copies of any document that governs the establishment, maintenance, or operation of a subdivision, including, but not limited to, restrictions, bylaws, rules and regulations, and a resale certificate from a property owners' association. A resale certificate contains information including, but not limited to, statements specifying the amount and frequency of regular assessments and the style and cause number of lawsuits to which the property owners' association is a party, other than lawsuits relating to unpaid ad valorem taxes of an individual member of the association. These documents must be made available to you by the property owners' association or the association's agent on your request. If Buyer is concerned about these matters, the TREC promulgated Addendum for Property Subject to Mandatory Membership in a Property Owners Association(s) should be used.

(3) STATUTORY TAX DISTRICTS: If the Property is situated in a utility or other statutorily created district providing water, sewer, drainage, or flood control facilities and services, Chapter 49, Texas Water Code, requires Seller to deliver and Buyer to sign the statutory notice relating to the tax rate, bonded indebtedness, or standby fee of the district prior to final execution of this contract.

(4) TIDE WATERS: If the Property abuts the tidally influenced waters of the state, §33.135, Texas Natural Resources Code, requires a notice regarding coastal area property to be included in the contract. An addendum containing the notice promulgated by TREC or required by the parties must be used.

(5) ANNEXATION: If the Property is located outside the limits of a municipality, Seller notifies Buyer under §5.011, Texas Property Code, that the Property may now or later be included in the extraterritorial jurisdiction of a municipality and may now or later be subject to annexation by the municipality. Each municipality maintains a map that depicts its boundaries and extraterritorial jurisdiction. To determine if the Property is located within a municipality's extraterritorial jurisdiction or is likely to be located within a municipality's extraterritorial jurisdiction, contact all municipalities located in the general proximity of the Property for further information.

(6) PROPERTY LOCATED IN A CERTIFICATED SERVICE AREA OF A UTILITY SERVICE PROVIDER: Notice required by §13.257, Water Code: The real property, described in Paragraph 2, that you are about to purchase may be located in a certificated water or sewer service area, which is authorized by law to provide water or sewer service to the properties in the certificated area. If your property is located in a certificated area there may be special costs or charges that you will be required to pay before you can receive water or sewer service. There may be a period required to construct lines or other facilities necessary to provide water or sewer service to your property. You are advised to determine if the property is in a certificated area and contact the utility service provider to determine the cost that you will be required to pay and the period, if any, that is required to provide water or sewer service to your property. The undersigned Buyer hereby acknowledges receipt of the foregoing notice at or before the execution of a binding contract for the purchase of the real property described in Paragraph 2 or at closing of purchase of the real property.

(7) PUBLIC IMPROVEMENT DISTRICTS: If the Property is in a public improvement district, Seller must give Buyer written notice as required by §5.014, Property Code. An addendum containing the required notice shall be attached to this contract.

(8) TRANSFER FEES: If the Property is subject to a private transfer fee obligation, §5.205, Property Code, requires Seller to notify Buyer as follows: The private transfer fee obligation may be governed by Chapter 5, Subchapter G of the Texas Property Code.

(9) PROPANE GAS SYSTEM SERVICE AREA: If the Property is located in a propane gas system service area owned by a distribution system retailer, Seller must give Buyer written notice as required by §141.010, Texas Utilities Code. An addendum containing the notice approved by TREC or required by the parties should be used.

(10) NOTICE OF WATER LEVEL FLUCTUATIONS: If the Property adjoins an impoundment of water, including a reservoir or lake, constructed and maintained under Chapter 11, Water Code, that has a storage capacity of at least 5,000 acre-feet at the impoundment's normal operating level, Seller hereby notifies Buyer: "The water level of the impoundment of water adjoining the Property fluctuates for various reasons, including as a result of: (1) an entity lawfully exercising its right to use the water stored in the impoundment; or (2) drought or flood conditions."

(11) REQUIRED NOTICES: The following notices have been given or are attached to this contract (for example, MUD, WCID, PID notices): ______________________

____

7. PROPERTY CONDITION:

A. ACCESS, INSPECTIONS AND UTILITIES: Seller shall permit Buyer and Buyer's agents access to the Property at reasonable times. Buyer may have the Property inspected by inspectors selected by Buyer and licensed by TREC or otherwise permitted by law to make inspections. Any hydrostatic testing must be separately authorized by Seller in writing. Seller at Seller's expense shall immediately cause existing utilities to be turned on and shall keep the utilities on during the time this contract is in effect.

B. SELLER'S DISCLOSURE NOTICE PURSUANT TO §5.008, TEXAS PROPERTY CODE (Notice): (Check one box only)

☐ (1) Buyer has received the Notice.

☐ (2) Buyer has not received the Notice. Within ____________ days after the Effective Date of this contract, Seller shall deliver the Notice to Buyer. If Buyer does not receive the Notice, Buyer may terminate this contract at any time prior to the closing and the earnest money will be refunded to Buyer. If Seller delivers the Notice, Buyer may terminate this contract for any reason within 7 days after Buyer receives the Notice or prior to the closing, whichever first occurs, and the earnest money will be refunded to Buyer.

☐ (3) The Seller is not required to furnish the notice under the Texas Property Code.

C. SELLER'S DISCLOSURE OF LEAD-BASED PAINT AND LEAD-BASED PAINT HAZARDS is required by Federal law for a residential dwelling constructed prior to 1978.

D. ACCEPTANCE OF PROPERTY CONDITION: "As Is" means the present condition of the Property with any and all defects and without warranty except for the warranties of title and the warranties in this contract. Buyer's agreement to accept the Property As Is under Paragraph 7D(1) or (2) does not preclude Buyer from inspecting the Property under Paragraph 7A, from negotiating repairs or treatments in a subsequent amendment, or from terminating this contract during the Option Period, if any.

(Check one box only)
[X] (1) Buyer accepts the Property As Is.
[ ] (2) Buyer accepts the Property As Is provided Seller, at Seller's expense, shall complete the following specific repairs and treatments: ____________________

(Do not insert general phrases, such as "subject to inspections" that do not identify specific repairs and treatments.)

E. LENDER REQUIRED REPAIRS AND TREATMENTS: Unless otherwise agreed in writing, neither party is obligated to pay for lender required repairs, which includes treatment for wood destroying insects. If the parties do not agree to pay for the lender required repairs or treatments, this contract will terminate and the earnest money will be refunded to Buyer. If the cost of lender required repairs and treatments exceeds 5% of the Sales Price, Buyer may terminate this contract and the earnest money will be refunded to Buyer.

F. COMPLETION OF REPAIRS AND TREATMENTS: Unless otherwise agreed in writing, Seller shall complete all agreed repairs and treatments prior to the Closing Date and obtain any required permits. The repairs and treatments must be performed by persons who are licensed to provide such repairs or treatments or, if no license is required by law, are commercially engaged in the trade of providing such repairs or treatments. Seller shall: (i) provide Buyer with copies of documentation from the repair person(s) showing the scope of work and payment for the work completed; and (ii) at Seller's expense, arrange for the transfer of any transferable warranties with respect to the repairs and treatments to Buyer at closing. If Seller fails to complete any agreed repairs and treatments prior to the Closing Date, Buyer may exercise remedies under Paragraph 15 or extend the Closing Date up to 5 days if necessary for Seller to complete the repairs and treatments.

G. ENVIRONMENTAL MATTERS: Buyer is advised that the presence of wetlands, toxic substances, including asbestos and wastes or other environmental hazards, or the presence of a threatened or endangered species or its habitat may affect Buyer's intended use of the Property. If Buyer is concerned about these matters, an addendum promulgated by TREC or required by the parties should be used.

H. RESIDENTIAL SERVICE CONTRACTS: Buyer may purchase a residential service contract from a provider or administrator licensed by the Texas Department of Licensing and Regulation. If Buyer purchases a residential service contract, Seller shall reimburse Buyer at closing for the cost of the residential service contract in an amount not exceeding $ ____________. Buyer should review any residential service contract for the scope of coverage, exclusions and limitations. The purchase of a residential service contract is optional. Similar coverage may be purchased from various companies authorized to do business in Texas.

8. BROKERS AND SALES AGENTS:

A. BROKER OR SALES AGENT DISCLOSURE: Texas law requires a real estate broker or sales agent who is a party to a transaction or acting on behalf of a spouse, parent, child, business entity in which the broker or sales agent owns more than 10%, or a trust for which the broker or sales agent acts as a trustee or of which the broker or sales agent or the broker or sales agent's spouse, parent or child is a beneficiary, to notify the other party in writing before entering into a contract of sale. Disclose if applicable: ____________________

B. BROKERS' FEES: All obligations of the parties for payment of brokers' fees are contained in separate written agreements.

9. CLOSING:

A. The closing of the sale will be on or before July 30, 2024, or within 7 days after objections made under Paragraph 6D have been cured or waived, whichever date is later (Closing Date). If either party fails to close the sale by the Closing Date, the non-defaulting party may exercise the remedies contained in Paragraph 15.

B. At closing:

(1) Seller shall execute and deliver a ~~general~~ special warranty deed conveying title to the Property to Buyer and showing no additional exceptions to those permitted in Paragraph 6 and furnish tax statements or certificates showing no delinquent taxes on the Property. Rc for Buyer DH

(2) Buyer shall pay the Sales Price in good funds acceptable to the Escrow Agent.

(3) Seller and Buyer shall execute and deliver any notices, statements, certificates, affidavits, releases, loan documents, transfer of any warranties, and other documents reasonably required for the closing of the sale and the issuance of the Title Policy.

(4) There will be no liens, assessments, or security interests against the Property which will not be satisfied out of the sales proceeds unless securing the payment of any loans assumed by Buyer and assumed loans will not be in default.

(5) Private transfer fees (as defined by Chapter 5, Subchapter G of the Texas Property Code) will be the obligation of Seller unless provided otherwise in this contract. Transfer fees assessed by a property owners' association are governed by the Addendum for Property Subject to Mandatory Membership in a Property Owners Association.

10. POSSESSION:

A. BUYER'S POSSESSION: Seller shall deliver to Buyer possession of the Property in its present or required condition, ordinary wear and tear excepted: ☒ upon closing and funding ☐ according to a temporary residential lease form promulgated by TREC or other written lease required by the parties. Any possession by Buyer prior to closing or by Seller after closing which is not authorized by a written lease will establish a tenancy at sufferance relationship between the parties. **Consult your insurance agent prior to change of ownership and possession because insurance coverage may be limited or terminated. The absence of a written lease or appropriate insurance coverage may expose the parties to economic loss.**

B. SMART DEVICES: "Smart Device" means a device that connects to the internet to enable remote use, monitoring, and management of: (i) the Property; (ii) items identified in any Non-Realty Items Addendum; or (iii) items in a Fixture Lease assigned to Buyer. At the time Seller delivers possession of the Property to Buyer, Seller shall:

(1) deliver to Buyer written information containing all access codes, usernames, passwords, and applications Buyer will need to access, operate, manage, and control the Smart Devices; and

(2) terminate and remove all access and connections to the improvements and accessories from any of Seller's personal devices including but not limited to phones and computers.

11. SPECIAL PROVISIONS: (This paragraph is intended to be used only for additional informational items. An informational item is a statement that completes a blank in a contract form, discloses factual information, or provides instructions. Real estate brokers and sales agents are prohibited from practicing law and shall not add to, delete, or modify any provision of this contract unless drafted by a party to this contract or a party's attorney.) ______________________________

12. SETTLEMENT AND OTHER EXPENSES:

A. The following expenses must be paid at or prior to closing:

(1) Expenses payable by Seller (Seller's Expenses):

(a) Releases of existing liens, including prepayment penalties and recording fees; release of Seller's loan liability; tax statements or certificates; preparation of deed; one-half of escrow fee; and other expenses payable by Seller under this contract.

(b) Seller shall also pay an amount not to exceed $ ______________ to be applied in the following order: Buyer's Expenses which Buyer is prohibited from paying by FHA, VA, Texas Veterans Land Board or other governmental loan programs, and then to other Buyer's Expenses as allowed by the lender.

(2) Expenses payable by Buyer (Buyer's Expenses): Appraisal fees; loan application fees; origination charges; credit reports; preparation of loan documents; interest on the notes from date of disbursement to one month prior to dates of first monthly payments; recording fees; copies of easements and restrictions; loan title policy with endorsements required by lender; loan-related inspection fees; photos; amortization schedules; one-half of escrow fee; all prepaid items, including required premiums for flood and hazard insurance, reserve deposits for insurance, ad valorem taxes and special governmental assessments; final compliance inspection; courier fee; repair inspection; underwriting fee; wire transfer fee; expenses incident to any loan; Private Mortgage Insurance Premium (PMI), VA Loan Funding Fee, or FHA Mortgage Insurance Premium (MIP) as required by the lender; and other expenses payable by Buyer under this contract.

B. If any expense exceeds an amount expressly stated in this contract for such expense to be paid by a party, that party may terminate this contract unless the other party agrees to pay such excess. Buyer may not pay charges and fees expressly prohibited by FHA, VA, Texas Veterans Land Board or other governmental loan program regulations.

13. PRORATIONS: Taxes for the current year, interest, rents, and regular periodic maintenance fees, assessments, and dues (including prepaid items) will be prorated through the Closing Date. The tax proration may be calculated taking into consideration any change in exemptions that will affect the current year's taxes. If taxes for the current year vary from the amount prorated at closing, the parties shall adjust the prorations when tax statements for the current year are available. If taxes are not paid at or prior to closing, Buyer shall pay taxes for the current year.

14. CASUALTY LOSS: If any part of the Property is damaged or destroyed by fire or other casualty after the Effective Date of this contract, Seller shall restore the Property to its previous condition as soon as reasonably possible, but in any event by the Closing Date. If Seller fails to do so due to factors beyond Seller's control, Buyer may (a) terminate this contract and the earnest money

will be refunded to Buyer (b) extend the time for performance up to 15 days and the Closing Date will be extended as necessary or (c) accept the Property in its damaged condition with an assignment of insurance proceeds, if permitted by Seller's insurance carrier, and receive credit from Seller at closing in the amount of the deductible under the insurance policy. Seller's obligations under this paragraph are independent of any other obligations of Seller under this contract.

15. **DEFAULT:** If Buyer fails to comply with this contract, Buyer will be in default, and Seller may (a) enforce specific performance, seek such other relief as may be provided by law, or both, or (b) terminate this contract and receive the earnest money as liquidated damages, thereby releasing both parties from this contract. If Seller fails to comply with this contract, Seller will be in default and Buyer may (a) enforce specific performance, seek such other relief as may be provided by law, or both, or (b) terminate this contract and receive the earnest money, thereby releasing both parties from this contract.

16. **MEDIATION:** It is the policy of the State of Texas to encourage resolution of disputes through alternative dispute resolution procedures such as mediation. Any dispute between Seller and Buyer related to this contract which is not resolved through informal discussion will be submitted to a mutually acceptable mediation service or provider. The parties to the mediation shall bear the mediation costs equally. This paragraph does not preclude a party from seeking equitable relief from a court of competent jurisdiction.

17. **ATTORNEY'S FEES:** A Buyer, Seller, Listing Broker, Other Broker, or Escrow Agent who prevails in any legal proceeding related to this contract is entitled to recover reasonable attorney's fees and all costs of such proceeding.

18. **ESCROW:**

   A. ESCROW: The Escrow Agent is not (i) a party to this contract and does not have liability for the performance or nonperformance of any party to this contract, (ii) liable for interest on the earnest money and (iii) liable for the loss of any earnest money caused by the failure of any financial institution in which the earnest money has been deposited unless the financial institution is acting as Escrow Agent. Escrow Agent may require any disbursement made in connection with this contract to be conditioned on Escrow Agent's collection of good funds acceptable to Escrow Agent.

   B. EXPENSES: At closing, the earnest money must be applied first to any cash down payment, then to Buyer's Expenses and any excess refunded to Buyer. If no closing occurs, Escrow Agent may: (i) require a written release of liability of the Escrow Agent from all parties before releasing any earnest money; and (ii) require payment of unpaid expenses incurred on behalf of a party. Escrow Agent may deduct authorized expenses from the earnest money payable to a party. "Authorized expenses" means expenses incurred by Escrow Agent on behalf of the party entitled to the earnest money that were authorized by this contract or that party.

   C. DEMAND: Upon termination of this contract, either party or the Escrow Agent may send a release of earnest money to each party and the parties shall execute counterparts of the release and deliver same to the Escrow Agent. If either party fails to execute the release, either party may make a written demand to the Escrow Agent for the earnest money. If only one party makes written demand for the earnest money, Escrow Agent shall promptly provide a copy of the demand to the other party. If Escrow Agent does not receive written objection to the demand from the other party within 15 days, Escrow Agent may disburse the earnest money to the party making demand reduced by the amount of unpaid expenses incurred on behalf of the party receiving the earnest money and Escrow Agent may pay the same to the creditors. If Escrow Agent complies with the provisions of this paragraph, each party hereby releases Escrow Agent from all adverse claims related to the disbursal of the earnest money.

   D. DAMAGES: Any party who wrongfully fails or refuses to sign a release acceptable to the Escrow Agent within 7 days of receipt of the request will be liable to the other party for (i) damages; (ii) the earnest money; (iii) reasonable attorney's fees; and (iv) all costs of suit.

   E. NOTICES: Escrow Agent's notices will be effective when sent in compliance with Paragraph 21. Notice of objection to the demand will be deemed effective upon receipt by Escrow Agent.

19. **REPRESENTATIONS:** All covenants, representations and warranties in this contract survive closing. If any representation of Seller in this contract is untrue on the Closing Date, Seller will be in default. Unless expressly prohibited by written agreement, Seller may continue to show the Property and receive, negotiate and accept back up offers.

20. **FEDERAL TAX REQUIREMENTS:** If Seller is a "foreign person," as defined by Internal Revenue Code and its regulations, or if Seller fails to deliver an affidavit or a certificate of non-foreign status to Buyer that Seller is not a "foreign person," then Buyer shall withhold from the sales proceeds an amount sufficient to comply with applicable tax law and deliver the same to the Internal Revenue Service together with appropriate tax forms. Internal Revenue Service regulations require filing written reports if currency in excess of specified amounts is received in the transaction.

EXECUTED the ________ day of 07/18/24 ________, ______ (Effective Date).
(BROKER: FILL IN THE DATE OF FINAL ACCEPTANCE.)

Buyer CALHOUN COUNTY

Seller OVATION SERVICES

Buyer

Authentisign
Darin Hathcock 07/18/24
Seller

The form of this contract has been approved by the Texas Real Estate Commission. TREC forms are intended for use only by trained real estate license holders. No representation is made as to the legal validity or adequacy of any provision in any specific transactions. It is not intended for complex transactions. Texas Real Estate Commission, P.O. Box 12188, Austin, TX 78711-2188, (512) 936-3000 (http://www.trec.texas.gov) TREC NO. 20-17. This form replaces TREC NO. 20-16.

BROKER INFORMATION
(Print name(s) only. Do not sign)

Russell Cain Real Estate — 163380 Other Broker Firm — License No.	RE/MAX Land & Homes — 589279 Listing Broker Firm — License No.
represents [X] Buyer only as Buyer's agent [ ] Seller as Listing Broker's subagent	represents [ ] Seller and Buyer as an intermediary [X] Seller only as Seller's agent
Russell Cain — 0163380 Associate's Name — License No.	Rose Bland-Stewart Listing Associate's Name — License No.
Team Name	The Franklin Team Team Name
Rc@russellcain.com — (361)552-6313 Associate's Email Address — Phone	rose@franklinrealestateteam.com — (361)920-7167 Listing Associate's Email Address — Phone
Licensed Supervisor of Associate — License No.	Licensed Supervisor of Listing Associate — License No.
2025 Nhwy 35 — (361)552-6313 Other Broker's Address — Phone	602 N. Virginia St — (361)920-7167 Listing Broker's Office Address — Phone
Port Lavaca — TX — 77979 City — State — Zip	Port Lavaca — TX — 77979 City — State — Zip
	Selling Associate's Name — License No.
	Team Name
	Selling Associate's Email Address — Phone
	Licensed Supervisor of Selling Associate — License No.
	Selling Associate's Office Address
	City — State — Zip

Disclosure: Pursuant to a previous, separate agreement (such as a MLS offer of compensation or other agreement between brokers), Listing Broker has agreed to pay Other Broker a fee (3 __________). This disclosure is for informational purposes and does not change the previous agreement between brokers to pay or share a commission.

Property Details

Account

Property ID:	17201	**Geographic ID:**	S0001-00270-0004-B0
Type:	Real	**Zoning:**	
Property Use:		**Condo:**	

DH

Location

Situs Address:	312 S ANN ST PORT LAVACA, TX 77979		
Map ID:	S0001-00270-0009-00	**Mapsco:**	1600.3
Legal Description:	PORT LAVACA ORIGINAL TOWNSITE, BLOCK 27, LOT 9		
Abstract/Subdivision:	S0001 - PORT LAVACA ORIGINAL TOWNSITE		
Neighborhood:	1600		

Owner

Owner ID:	124044
Name:	OVATION SERVICES
Agent:	
Mailing Address:	12672 SILICON DR #150 SAN ANTONIO, TX 78249
% Ownership:	100.00%
Exemptions:	For privacy reasons not all exemptions are shown online.

Property Values

Improvement Homesite Value:	$0 (+)
Improvement Non-Homesite Value:	$23,910 (+)
Land Homesite Value:	$0 (+)
Land Non-Homesite Value:	$7,700 (+)
Agricultural Market Valuation:	$0 (+)
Market Value:	$31,610 (=)

Agricultural Value Loss: $0 (-) DH

Appraised Value: $31,610 (=)

Homestead Cap Loss: $0 (-)

Assessed Value: $31,610

Ag Use Value: $0

Values displayed are 2024 preliminary values and are subject to change prior to certification.
Information provided for research purposes only. Legal descriptions and acreage amounts are for appraisal district use only and should be verified prior to using for legal purpose and or documents. Please contact the Appraisal District to verify all information for accuracy.

Property Taxing Jurisdiction

Owner: OVATION SERVICES **%Ownership:** 100.00%

Entity	Description	Tax Rate	Market Value	Taxable Value	Estimated Tax	Freeze Ceiling
C04	CITY OF PORT LAVACA	0.780700	$31,610	$31,610	$246.78	
CAD	CALHOUN COUNTY APPRAISAL DISTRICT	0.000000	$31,610	$31,610	$0.00	
FML	FARM TO MARKET & LATERAL ROAD	0.000000	$31,610	$31,610	$0.00	
G05	CALHOUN COUNTY	0.560100	$31,610	$31,610	$177.05	
GWD	CALHOUN COUNTY GROUNDWATER CONSERVATION DISTRICT	0.007000	$31,610	$31,610	$2.21	
NV6	CALHOUN PORT AUTHORITY	0.000700	$31,610	$31,610	$0.22	
S01	CALHOUN COUNTY ISD	0.794900	$31,610	$31,610	$251.27	

Total Tax Rate: 2.143400

Estimated Taxes With Exemptions: $677.53

Estimated Taxes Without Exemptions: $677.53

Form **W-9**
(Rev. November 2017)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

▶ Go to *www.irs.gov/FormW9* for instructions and the latest information.

Give Form to the requester. Do not send to the IRS.

Print or type.
See Specific Instructions on page 3.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.

Momentum Title, LLC

2 Business name/disregarded entity name, if different from above

3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.

☐ Individual/sole proprietor or single-member LLC ☐ C Corporation ☐ S Corporation ☐ Partnership ☐ Trust/estate

☑ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ ______

Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.

☐ Other (see instructions) ▶

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any) ______

Exemption from FATCA reporting code (if any) ______

(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.) See instructions.

25700 I-45 North, Ste 100

Requester's name and address (optional)

6 City, state, and ZIP code

Spring, TX 77386

7 List account number(s) here (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number

☐☐☐ – ☐☐ – ☐☐☐☐

or

Employer identification number

4 6 – 0 8 6 3 8 5 0

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here Signature of U.S. person ▶ Date ▶ 06 . 08 . 2018

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to *www.irs.gov/FormW9.*

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, *later.*

CERTIFICATE OF INTERESTED PARTIES

FORM 1295

Complete Nos. 1 - 4 and 6 if there are interested parties. Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.	**OFFICE USE ONLY** **CERTIFICATION OF FILING**
1 Name of business entity filing form, and the city, state and country of the business entity's place of business. Momentum Title ,LLC Houston, TX United States	**Certificate Number:** 2024-1191179 **Date Filed:** 07/23/2024
2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed. Calhoun County	**Date Acknowledged:**

3 Provide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a description of the services, goods, or other property to be provided under the contract.

2024-0076

312 South Ann Street, Port Lavaca, TX 77979

4 Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
		Controlling	Intermediary
Momentum Title, LLC	Houston, TX United States	X	

5 Check only if there is NO Interested Party. ☐

6 UNSWORN DECLARATION

My name is Rebecca Laird, and my date of birth is [redacted].

My address is [redacted]
(street) (city) (state) (zip code) (country)

I declare under penalty of perjury that the foregoing is true and correct.

Executed in Harris County, State of Texas, on the 25 day of July (month), 2024 (year).

Signature of authorized agent of contracting business entity
(Declarant)

12

12. Discuss and take necessary action on a resolution authorizing publication and posting of a notice of intention to issue Certificates of Obligation for improvements to the County – Owned Hospital; and providing for an effective date. (RHM)

Financial Advisor, Anne with Hilltop Securities gave a presentation. Court approved Resolution with an effective date of September 18, 2024.

RESULT:	**APPROVED [UNANIMOUS]**
MOVER:	Vern Lyssy, Commissioner Pct 2
SECONDER:	David Hall, Commissioner Pct 1
AYES:	Judge Meyer, Commissioner Hall, Lyssy, Behrens, Reese

<u>**CERTIFICATE OF COUNTY CLERK**</u>

THE STATE OF TEXAS §
§
COUNTY OF CALHOUN §

THE UNDERSIGNED HEREBY CERTIFIES that:

1. The Commissioners Court (the *Court*) of Calhoun County, Texas (the *County*), convened on the 24th day of July, 2024 in regular session in the regular meeting place of the Court in the County Courthouse (the *Meeting*), which Meeting was at all times open to the public, the duly constituted officers and members of the Court being as follows:

Richard H. Meyer	County Judge
David Hall	Commissioner, Precinct 1
Vern Lyssy	Commissioner, Precinct 2
Joel Behrens	Commissioner, Precinct 3
Gary Reese	Commissioner, Precinct 4

and all of such persons were present at the Meeting, except the following: ____________________, thus constituting a quorum. Among other business considered at the Meeting, the attached Resolution (the *Resolution*) entitled:

RESOLUTION AUTHORIZING PUBLICATION AND POSTING OF A NOTICE OF INTENTION TO ISSUE CERTIFICATES OF OBLIGATION FOR IMPROVEMENTS TO THE COUNTY-OWNED HOSPITAL; AND PROVIDING FOR AN EFFECTIVE DATE

was introduced for the due consideration of the Court. After presentation and discussion of the Resolution, a motion was made by Commissioner Lyssy that the Resolution be passed and adopted. The motion was seconded by Commissioner Hall and carried by the following vote:

√ voted "For" ___ voted "Against" ___ "Abstained"

all as shown in the official Minutes of the Court for the Meeting.

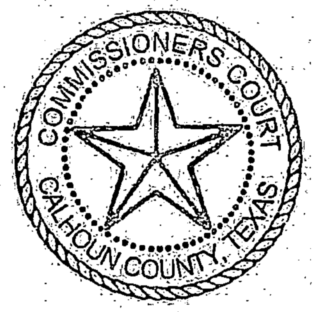
2. The attached Resolution is a true and correct copy of the original on file in the official records of the County; the duly qualified and acting members of the Court on the date of the Meeting are those persons shown above, and, according to the records of my office, each member of the Court was given actual notice of the time, place, and purpose of the Meeting and had actual notice that the Resolution would be considered; and the Meeting and deliberation of the aforesaid public business, was open to the public and written notice of said meeting including the subject of the Resolution, was posted and given in advance thereof in compliance with the provisions of Chapter 551, as amended, Texas Government Code.

IN WITNESS WHEREOF, I have signed my name officially and affixed the seal of the Commissioners Court, this 24th day of July, 2024.

Anna M. Goodman

County Clerk, Calhoun County, Texas

(SEAL OF COMMISSIONERS COURT)



RESOLUTION AUTHORIZING PUBLICATION AND POSTING OF A NOTICE OF INTENTION TO ISSUE CERTIFICATES OF OBLIGATION FOR IMPROVEMENTS TO THE COUNTY-OWNED HOSPITAL; AND PROVIDING FOR AN EFFECTIVE DATE

WHEREAS**,** the Commissioners Court of **CALHOUN COUNTY, TEXAS** (the *County*) has determined that it is necessary and desirable to issue certificates of obligation for the purposes of paying contractual obligations of the County to be incurred to: (1) construct, renovate, and otherwise improve County-owned buildings, including the County-owned hospital (the *Project*), (2) purchase materials, supplies, equipment, machinery, buildings, land, and rights-of-way for the Project; and (3) the payment of professional services relating to the design, construction, project management, and financing of the Project, including services by tax appraisal engineers, engineers, architects, attorneys, auditors, mapmakers, financial advisors, and fiscal agents; and

WHEREAS, the County intends to finance the Projects from proceeds derived from the sale of one or more series of Combination Tax and Revenue Certificates of Obligation issued by the Commissioners Court pursuant to Sections 271.041 through 271.064, as amended, Texas Local Government Code; and

WHEREAS, pursuant to Section 271.049, as amended, Texas Local Government Code, the County deems it advisable to give notice of intention to issue certificates of obligation in an amount not to exceed an aggregate principal amount of $30,000,000 for the purpose of paying, in whole or in part, the costs of the Projects, to pay all or a portion of the legal, fiscal and engineering fees in connection with the Projects, and to pay the costs of issuance related to the certificates of obligation; and

WHEREAS, the Commissioners Court hereby finds and determines that the adoption of this Resolution is in the best interests of the residents of the County; now, therefore,

BE IT RESOLVED BY THE COMMISSIONERS COURT OF CALHOUN COUNTY, TEXAS:

SECTION 1. APPROVAL OF NOTICE OF INTENTION. Attached hereto as *Exhibit A* is a form of the Notice of Intention to Issue Certificates of Obligation (the *Notice*), the form and substance of which is hereby adopted and approved. The County Judge, County Clerk, County Treasurer, County Auditor, and/or County Attorney or any of their respective designees, are each authorized to make changes to the Notice as necessary prior to its publication and posting as described in Sections 2 and 3 below.

SECTION 2. PUBLICATION OF NOTICE OF INTENTION IN NEWSPAPER. The County Clerk shall cause the Notice to be published in substantially the form attached hereto in *The Port Lavaca Wave,* being a newspaper (as defined by Subchapter C of Chapter 2051, as amended, Government Code) that is hereby found and determined to be of general circulation in the area of the County, on the same day in each of two consecutive weeks, the date of the first publication thereof to be at least 46 days before the date tentatively set for the passage of the order authorizing the issuance of such certificates of obligation as shown in the Notice (the *Authorizing Order*).

SECTION 3. POSTING OF NOTICE OF INTENTION ON COUNTY'S WEBSITE. The County Clerk shall further cause the Notice to be posted on the County's Internet website beginning at least 45 days before, and continuing through, the date tentatively set for the passage of the Authorizing Order, as shown in the Notice.

SECTION 4. REVOCATION OF CONFLICTING ACTION. All orders and resolutions, or parts thereof, which are in conflict or inconsistent with any provision of this Resolution are hereby repealed to the extent of such conflict, and the provisions of this Resolution shall be and remain controlling as to the matters resolved herein.

SECTION 5. GOVERNING LAW. This Resolution shall be construed and enforced in accordance with the laws of the State of Texas and the United States of America.

SECTION 6. SEVERABILITY. If any provision of this Resolution or the application thereof to any person or circumstance shall be held to be invalid, the remainder of this Resolution and the application of such provision to other persons and circumstances shall nevertheless be valid, and the Commissioners Court hereby declares that this Resolution would have been enacted without such invalid provision.

SECTION 7. COMPLIANCE WITH OPEN MEETINGS ACT. It is officially found, determined, and declared that the meeting at which this Resolution is adopted was open to the public and public notice of the time, place, and subject matter of the public business to be considered at such meeting, including this Resolution, was given, all as required by Chapter 551, as amended, Texas Government Code.

SECTION 8. INCORPORATION OF RECITALS. The Commissioners Court hereby finds that the statements set forth in the recitals of this Resolution are true and correct, and the Commissioners Court hereby incorporates such recitals as a part of this Resolution.

SECTION 9. EFFECTIVE DATE. This Resolution shall become effective immediately upon passage.

PASSED AND APPROVED BY THE COMMISSIONERS COURT, CALHOUN COUNTY, TEXAS AT A REGULARLY SCHEDULED MEETING HELD ON THE 24TH DAY OF JULY, 2024.

CALHOUN COUNTY, TEXAS

County Judge

Attest:

Anna M. Goodman

County Clerk

EXHIBIT A

CALHOUN COUNTY, TEXAS NOTICE OF INTENTION TO ISSUE CERTIFICATES OF OBLIGATION

The Commissioners Court of Calhoun County, Texas (the "County") does hereby give notice of intention to issue one or more series of *Calhoun County, Texas Combination Tax and Hospital Revenue Certificates of Obligation* (the *Certificates*) in the maximum aggregate principal amount not to exceed $30,000,000 for the purposes of paying, in whole or in part, contractual obligations of the County to be incurred to: (1) construct, renovate, and otherwise improve County-owned buildings, including the County-owned hospital (the *Project*), (2) purchase materials, supplies, equipment, machinery, buildings, land, and rights-of-way for the Project; and (3) the payment of professional services relating to the design, construction, project management, and financing of the Project, including services by tax appraisal engineers, engineers, architects, attorneys, auditors, mapmakers, financial advisors, and fiscal agents. The County proposes to provide for the payment of such Certificates from the levy and collection of ad valorem taxes in the County, within the limits prescribed by law, and from a lien on and pledge of "Surplus Revenues," if any, received by the County from the ownership and operation of the County owned hospital. The current principal of all currently outstanding debt obligations of the County is $495,000, the combined principal and interest required to pay all currently outstanding debt obligations of the County on time and in full is $514,800, the estimated combined principal and interest required to pay the proposed Certificates on time and in full is $49,990,575, the estimated interest rate for the Certificates is 5.50% per annum, and the maximum maturity date of the proposed Certificates is August 15, 2049. The Commissioners Court proposes to authorize the issuance of such Certificates at 10:00 a.m. on September 18, 2024, at a Regularly Scheduled Meeting to be held at Commissioners Court located at the Calhoun County Courthouse, Commissioners Courtroom, located at 211 S. Ann St., Suite 104, Port Lavaca, TX 77979, Texas (in the event the Commissioners Court will be unable to meet at said location, the County will post information on its website for attending the meeting at an alternate location, by telephone, teleconference, or other electronic means). The Certificates are to be issued, and this notice is given, under and pursuant to the provisions of the Certificate of Obligation Act of 1971 (Sections 271.041 through 271.064, as amended, Texas Local Government Code), and Chapter 263, as amended, Health and Safety Code.

/s/ Anna Goodman
County Clerk

CERTIFICATE OF COUNTY CLERK

THE STATE OF TEXAS §
§
COUNTY OF CALHOUN §

THE UNDERSIGNED HEREBY CERTIFIES that:

1. The Commissioners Court (the *Court*) of Calhoun County, Texas (the *County*), convened on the 24th day of July, 2024 in regular session in the regular meeting place of the Court in the County Courthouse (the *Meeting*), which Meeting was at all times open to the public, the duly constituted officers and members of the Court being as follows:

Richard H. Meyer	County Judge
David Hall	Commissioner, Precinct 1
Vern Lyssy	Commissioner, Precinct 2
Joel Behrens	Commissioner, Precinct 3
Gary Reese	Commissioner, Precinct 4

and all of such persons were present at the Meeting, except the following: ___________________, thus constituting a quorum. Among other business considered at the Meeting, the attached Resolution (the *Resolution*) entitled:

RESOLUTION AUTHORIZING PUBLICATION AND POSTING OF A NOTICE OF INTENTION TO ISSUE CERTIFICATES OF OBLIGATION FOR IMPROVEMENTS TO THE COUNTY-OWNED HOSPITAL; AND PROVIDING FOR AN EFFECTIVE DATE

was introduced for the due consideration of the Court. After presentation and discussion of the Resolution, a motion was made by Commissioner Lyssy that the Resolution be passed and adopted. The motion was seconded by Commissioner Hall and carried by the following vote:

✓ voted "For" ___ voted "Against" ___ "Abstained"

all as shown in the official Minutes of the Court for the Meeting.

2. The attached Resolution is a true and correct copy of the original on file in the official records of the County; the duly qualified and acting members of the Court on the date of the Meeting are those persons shown above, and, according to the records of my office, each member of the Court was given actual notice of the time, place, and purpose of the Meeting and had actual notice that the Resolution would be considered; and the Meeting and deliberation of the aforesaid public business, was open to the public and written notice of said meeting including the subject of the Resolution, was posted and given in advance thereof in compliance with the provisions of Chapter 551, as amended, Texas Government Code.

IN WITNESS WHEREOF, I have signed my name officially and affixed the seal of the Commissioners Court, this 24th day of July, 2024.

County Clerk, Calhoun County, Texas

(SEAL OF COMMISSIONERS COURT)

COMMISSIONERS COURT
CALHOUN COUNTY, TEXAS

RESOLUTION AUTHORIZING PUBLICATION AND POSTING OF A NOTICE OF INTENTION TO ISSUE CERTIFICATES OF OBLIGATION FOR IMPROVEMENTS TO THE COUNTY-OWNED HOSPITAL; AND PROVIDING FOR AN EFFECTIVE DATE

WHEREAS, the Commissioners Court of **CALHOUN COUNTY, TEXAS** (the *County*) has determined that it is necessary and desirable to issue certificates of obligation for the purposes of paying contractual obligations of the County to be incurred to: (1) construct, renovate, and otherwise improve County-owned buildings, including the County-owned hospital (the *Project*), (2) purchase materials, supplies, equipment, machinery, buildings, land, and rights-of-way for the Project; and (3) the payment of professional services relating to the design, construction, project management, and financing of the Project, including services by tax appraisal engineers, engineers, architects, attorneys, auditors, mapmakers, financial advisors, and fiscal agents; and

WHEREAS, the County intends to finance the Projects from proceeds derived from the sale of one or more series of Combination Tax and Revenue Certificates of Obligation issued by the Commissioners Court pursuant to Sections 271.041 through 271.064, as amended, Texas Local Government Code; and

WHEREAS, pursuant to Section 271.049, as amended, Texas Local Government Code, the County deems it advisable to give notice of intention to issue certificates of obligation in an amount not to exceed an aggregate principal amount of $30,000,000 for the purpose of paying, in whole or in part, the costs of the Projects, to pay all or a portion of the legal, fiscal and engineering fees in connection with the Projects, and to pay the costs of issuance related to the certificates of obligation; and

WHEREAS, the Commissioners Court hereby finds and determines that the adoption of this Resolution is in the best interests of the residents of the County; now, therefore,

BE IT RESOLVED BY THE COMMISSIONERS COURT OF CALHOUN COUNTY, TEXAS:

SECTION 1. **APPROVAL OF NOTICE OF INTENTION.** Attached hereto as ***Exhibit A*** is a form of the Notice of Intention to Issue Certificates of Obligation (the *Notice*), the form and substance of which is hereby adopted and approved. The County Judge, County Clerk, County Treasurer, County Auditor, and/or County Attorney or any of their respective designees, are each authorized to make changes to the Notice as necessary prior to its publication and posting as described in Sections 2 and 3 below.

SECTION 2. PUBLICATION OF NOTICE OF INTENTION IN NEWSPAPER. The County Clerk shall cause the Notice to be published in substantially the form attached hereto in *The Port Lavaca Wave,* being a newspaper (as defined by Subchapter C of Chapter 2051, as amended, Government Code) that is hereby found and determined to be of general circulation in the area of the County, on the same day in each of two consecutive weeks, the date of the first publication thereof to be at least 46 days before the date tentatively set for the passage of the order authorizing the issuance of such certificates of obligation as shown in the Notice (the *Authorizing Order*).

SECTION 3. POSTING OF NOTICE OF INTENTION ON COUNTY'S WEBSITE. The County Clerk shall further cause the Notice to be posted on the County's Internet website beginning at least 45 days before, and continuing through, the date tentatively set for the passage of the Authorizing Order, as shown in the Notice.

SECTION 4. REVOCATION OF CONFLICTING ACTION. All orders and resolutions, or parts thereof, which are in conflict or inconsistent with any provision of this Resolution are hereby repealed to the extent of such conflict, and the provisions of this Resolution shall be and remain controlling as to the matters resolved herein.

SECTION 5. GOVERNING LAW. This Resolution shall be construed and enforced in accordance with the laws of the State of Texas and the United States of America.

SECTION 6. SEVERABILITY. If any provision of this Resolution or the application thereof to any person or circumstance shall be held to be invalid, the remainder of this Resolution and the application of such provision to other persons and circumstances shall nevertheless be valid, and the Commissioners Court hereby declares that this Resolution would have been enacted without such invalid provision.

SECTION 7. COMPLIANCE WITH OPEN MEETINGS ACT. It is officially found, determined, and declared that the meeting at which this Resolution is adopted was open to the public and public notice of the time, place, and subject matter of the public business to be considered at such meeting, including this Resolution, was given, all as required by Chapter 551, as amended, Texas Government Code.

SECTION 8. INCORPORATION OF RECITALS. The Commissioners Court hereby finds that the statements set forth in the recitals of this Resolution are true and correct, and the Commissioners Court hereby incorporates such recitals as a part of this Resolution.

SECTION 9. EFFECTIVE DATE. This Resolution shall become effective immediately upon passage.

EXHIBIT A

CALHOUN COUNTY, TEXAS NOTICE OF INTENTION TO ISSUE CERTIFICATES OF OBLIGATION

The Commissioners Court of Calhoun County, Texas (the "County") does hereby give notice of intention to issue one or more series of *Calhoun County, Texas Combination Tax and Hospital Revenue Certificates of Obligation* (the *Certificates*) in the maximum aggregate principal amount not to exceed $30,000,000 for the purposes of paying, in whole or in part, contractual obligations of the County to be incurred to: (1) construct, renovate, and otherwise improve County-owned buildings, including the County-owned hospital (the *Project*), (2) purchase materials, supplies, equipment, machinery, buildings, land, and rights-of-way for the Project; and (3) the payment of professional services relating to the design, construction, project management, and financing of the Project, including services by tax appraisal engineers, engineers, architects, attorneys, auditors, mapmakers, financial advisors, and fiscal agents. The County proposes to provide for the payment of such Certificates from the levy and collection of ad valorem taxes in the County, within the limits prescribed by law, and from a lien on and pledge of "Surplus Revenues," if any, received by the County from the ownership and operation of the County owned hospital. The current principal of all currently outstanding debt obligations of the County is $495,000, the combined principal and interest required to pay all currently outstanding debt obligations of the County on time and in full is $514,800, the estimated combined principal and interest required to pay the proposed Certificates on time and in full is $49,990,575, the estimated interest rate for the Certificates is 5.50% per annum, and the maximum maturity date of the proposed Certificates is August 15, 2049. The Commissioners Court proposes to authorize the issuance of such Certificates at 10:00 a.m. on September 18, 2024, at a Regularly Scheduled Meeting to be held at Commissioners Court located at the Calhoun County Courthouse, Commissioners Courtroom, located at 211 S. Ann St., Suite 104, Port Lavaca, TX 77979, Texas (in the event the Commissioners Court will be unable to meet at said location, the County will post information on its website for attending the meeting at an alternate location, by telephone, teleconference, or other electronic means). The Certificates are to be issued, and this notice is given, under and pursuant to the provisions of the Certificate of Obligation Act of 1971 (Sections 271.041 through 271.064, as amended, Texas Local Government Code), and Chapter 263, as amended, Health and Safety Code.

/s/ Anna Goodman
County Clerk

PASSED AND APPROVED BY THE COMMISSIONERS COURT, CALHOUN COUNTY, TEXAS AT A REGULARLY SCHEDULED MEETING HELD ON THE 24^{TH} DAY OF JULY, 2024.

CALHOUN COUNTY, TEXAS

County Judge, Richard H. Meyer

Attest: Anna Goodman, County Clerk

Kaddie Smith

By: Deputy Clerk

13

13. Consider and take necessary action to allow The Calhoun County Judge Richard Meyer sign the Order of Election and provide notice of the November 5, 2024 General Election. (RHM)

RESULT:	**APPROVED [UNANIMOUS]**
MOVER:	Gary Reese, Commissioner Pct 4
SECONDER:	Joel Behrens, Commissioner Pct 3
AYES:	Judge Meyer, Commissioner Hall, Lyssy, Behrens, Reese

CALHOUN COUNTY ELECTIONS DEPARTMENT

211 S. ANN ST, PORT LAVACA, TX 77979 • PH: 361-553-4440 • FAX: 361-553-4443

July 19, 2024

Honorable Richard Meyer
Calhoun County Judge
211 S. Ann St.
Port Lavaca, Texas 77979

RE: AGENDA ITEM

Dear Judge Meyer:

July 24, 2024

Please place the following item on the Commissioner's Court Agenda for ~~July 01, 2~~024.

* Consider and take necessary action to allow The Calhoun County Judge Richard Meyer sign the Order of Election and provide notice of the November 05, 2024 General Election.

Thank You,,

Mary Ann Orta

Mary Ann Orta
Calhoun County Elections Administrator

1-1
Prescribed by Secretary of State
Sections 3.004, 3.006, 85.004, 85.006, 85.007 Texas Election Code
9/2023

ORDER OF ELECTION – NOVEMBER GENERAL ELECTION FOR COUNTY OFFICERS
(ORDEN DE ELECCIÓN GENERAL POR FUNCIONARIOS DEL CONDADO)

An election is hereby ordered to be held on 11 / 05 /2024 (date) in Calhoun County, Texas for the purpose of electing the following county and precinct officers as required by Article XVI, Section 65 of the Texas Constitution.

(Por la presente se ordena que se lleve a cabo una elección en la fecha 11 / 05 /2024 *en el Condado de* Calhoun*, Texas, con el propósito de elegir los siguientes oficiales del condado y del precinto como requerido por el Articulo XVI, Sección 65, de la Constitución de Texas.)*

List Offices/Propositions/Measures on the ballot *(Enúmere los puestos/proposiciones/medidas oficiales en la boleta)*

Sheriff (Alguacil)
Tax Assessor - Collector (Asesor-Colector de Impuestos del Condado)
Commissioner Precinct No.1 (Comisinado del Condado, Precinto Num. 1)
Commissioner Precinct No. 3 (Comisinado del Condado, Precinto Num. 3)
Constable Precinct No. 1 (Condestable, Precinto Num. 1)
Constable Precinct No. 2 (Condestable, Precinto Num. 2)
Constable Precinct No. 3 (Condestable, Precinto Num. 3)
Constable Precinct No. 4 (Condestable, Precinto Num. 4)
Constable Precinct No. 5 (Condestable, Precinto Num. 5)

Early voting by personal appearance will be conducted each weekday at:
(La votación adelantada en persona se llevará a cabo de lunes a viernes en:)

The Main Early Voting Location *(sitio principal de votación adelantada)*

Location *(sitio)*	Hours *(horas)*
Calhoun County Courthouse Lobby	See Below

Branch Early Voting Locations *(sucursal sitios de votación adelantada)*

Location *(sitio)*	Hours *(horas)*
Calhoun County Courthouse Lobby	Monday Oct 21st thru Friday Oct 25th 8am - 5pm
211 S. Ann St.	Saturday October 26th 7am - 7pm
Port Lavaca, Tx 77979	Sunday October 27th 9am - 3pm
	Monday Oct 28th thru Friday Nov 01st 7am - 7pm

Early voting by personal appearance will be conducted each weekend at:
(La votación adelantada en persona se llevará a cabo en el fin de semana en:)

The Main Early Voting Location *(sitio principal de votación adelantada)*

Location *(sitio)*	Hours *(horas)*

Branch Early Voting Locations *(sucursal sitios de votación adelantada)*

Location *(sitio)*	Hours *(horas)*

Applications for ballot by mail shall be mailed to:
(Las solicitudes para boletas que se votarán adelantada por correo deberán enviarse a:)

Mary Ann Orta
Name of Early Voting Clerk
(Nombre del Secretario/a de la Votación Adelantada)

211 S. Ann St.
Address *(Dirección)*

Port Lavaca Texas 77979
City *(Ciudad)* Zip Code *(Código Postal)*

361-553-4440
Telephone Number *(Número de teléfono)*

mary.orta@calhouncotx.org
Email Address *(Dirección de Correo Electrónico)*

calhouncotxelections.org
Early Voting Clerk's Website *(Sitio web del Secretario/a de Votación Adelantada)*

Applications for Ballots by Mail (ABBMs) must be received no later than the close of business on:
(Las solicitudes para boletas que se votarán adelantada por correo deberán recibirse no más tardar de las horas de negocio el:)

10 / 25 /2024.
(date)*(fecha)*

Federal Post Card Applications (FPCAs) must be received no later than the close of business on:
(La Tarjeta Federal Postal de Solicitud deberán recibirse no más tardar de las horas de negocio el:)

10 / 25 /2024.
(date)*(fecha)*

Issued this 24 (day) day of July (month), 20 24 (year).

(Emitada este día 24 (día) de July (mes), 20 24 (año).)

Richard Meyer Calhoun County Judge
(Juez del Condado Calhoun)

14

14. Accept Monthly Reports from the following County Offices:

a) County Clerk – June 2024

RESULT:	**APPROVED [UNANIMOUS]**
MOVER:	Vern Lyssy, Commissioner Pct 2
SECONDER:	Gary Reese, Commissioner Pct 4
AYES:	Judge Meyer, Commissioner Hall, Lyssy, Behrens, Reese

CALHOUN COUNTY CLERK
MONTHLY REPORT RECAPITUATION

JUNE 2024						
DESC	GL CODE	CIVIL/FAMILY	CRIMINAL	OFFICIAL PUBLIC RECORDS	PROBATE	TOTAL
DISTRICT ATTORNEY FEES	1000-44020		$ 101.93			$ 101.93
BEER LICENSE	1000-42010			$ 5.00		$ 5.00
COUNTY CLERK FEES	1000-44030	$ 110.00	$ 203.86	$ 9,894.45	$ 727.00	$ 10,935.31
APPEAL FROM JP COURTS	1000-44030		$ -			$ -
COUNTY COURT AT LAW #1 JURY FEE	1000-44140					$ -
JURY FEE	1000-44140	$ -			$ -	$ -
ELECTRONIC FILING FEES FOR E-FILINGS	1000-44058	$ -	$ -	$ -	$ -	$ -
JUDGE'S EDUCATION FEE	1000-44160	$ -	$ -	$ -	$ 65.00	$ 65.00
JUDGE'S ORDER/SIGNATURE	1000-44180	$ 12.00	$ -	$ -	$ 78.00	$ 90.00
SHERIFF'S FEES	1000-44190	$ -	$ 86.81	$ -	$ 400.00	$ 486.81
VISUAL RECORDER FEE	1000-44250		$ 30.75			$ 30.75
TIME PAYMENT FEE - COUNTY **NEW 2020**	1000-44332		$ 75.00			$ 75.00
COURT REFPORTER FEE	1000-44270	$ 50.00	$ -	$ -	$ 325.00	$ 375.00
RESTITUTION DUE TO OTHERS	1000-49020					$ -
ATTORNEY FEES - COURT APPOINTED	1000-49030		$ -			$ -
APPELLATE FUND (TGC) FEE	2620-44030	$ 10.00			$ 65.00	$ 75.00
COURT FACILITY FEE FUND	2648-44030	$ 40.00	$ -	$ -	$ 260.00	$ 300.00
TECHNOLOGY FUND	2663-44030		$ 20.39			$ 20.39
COUNTY JURY FUND **NEW 2020**	2669-44030	$ 20.00	$ 5.10	$ -	$ 130.00	$ 155.10
COURTHOUSE SECURITY FEE	2670-44030	$ 40.00	$ 50.96	$ -	$ 265.00	$ 355.96
COURT INITIATED GUARDIANSHIP FEE	2672-44030				$ 390.00	$ 390.00
COURT RECORD PRESERVATION FUND	2673-44030	$ -		$ -	$ -	$ -
COURT REPORTER SERVICE FUND **NEW 2020**	2674-44030		$ 15.29			$ 15.29
RECORDS ARCHIVE FEE	2675-44030			$ 3,400.00		$ 3,400.00
COUNTY SPECIALTY COURT **NEW 2020**	2676-44030		$ 101.93			$ 101.93
COUNTY DISPUTE RESOLUTION FUND	2677-44030	$ 30.00	$ -	$ -	$ 195.00	$ 225.00
DRUG & ALCOHOL COURT PROGRAM	2698-44030-005		$ -			$ -
JUVENILE CASE MANAGER FUND	2699-44033		$ -			$ -
FAMILY PROTECTION FUND	2706-44030	$ -				$ -
JUVENILE CRIME & DELINQUENCY FUND	2715-44030		$0.00			$ -
LANGUAGE ACCESS FUND	2725-44030	$ 6.00	$ -	$ -	$ 39.00	$ 45.00
PRE-TRIAL DIVERSON AGREEMENT	2729-44034		$ -			$ -
LAW LIBARY FEE	2731-44030	$ 70.00			$ 455.00	$ 525.00
RECORDS MANAGEMENT FEE - COUNTY CLERKK	2738-44380		$ -	$ 3,410.00		$ 3,410.00
RECORDS MANGEMENT FEE - COUNTY	2739-44030	$ 60.00	$ 127.41		$ 200.00	$ 387.41
FINES - COUNTY COURT	2740-45040		$ 2,348.01			$ 2,348.01
BOND FORFEITURE	2740-45050	$ -				$ -
STATE POLICE OFFICER FEES - STATE (DPS) (20%)	7020-20740		$ -			$ -
CONSOLIDATED COURT COSTS - COUNTY	7070-20610		$ -			$ -
CONSOLIDATED COURT COSTS - STATE	7070-20740		$ -			$ -
CONSOLIDATED COURT COSTS - COUNTY **NEW 2020	7072-20610		$ 75.20			$ 75.20
CONSOLIDATED COURT COSTS - STATE **NEW 2020**	7072-20740		$ 676.80			$ 676.80
JUDICIAL AND COURT PERSONNEL TRAINING - ST (100%	7502-20740	$ -		$ -	$ -	$ -
DRUG & ALCOHOL COURT PROGRAM - COUNTY	7390-20610		$ -			$ -
DRUG & ALCOHOL COURT PROGRAM - STATE	7390-20740		$ -			$ -
STATE ELECTRONIC FILING FEE - CIVIL	7403-22887	$ -		$ -	$ -	$ -
STATE ELECTRONIC FILING FEE CRIMINAL	7403-22990		$ -			$ -
EMS TRAUMA - COUNTY (10%)	7405-20610		$ 252.24			$ 252.24
EMS TRAUMA - STATE (90%)	7405-20740		$ 28.03			$ 28.03
CIVIL INDIGENT FEE - COUNTY	7480-20610	$ -			$ -	$ -
CIVIL INDIGENT FEE - STATE	7480-20740	$ -			$ -	$ -
JUDICIAL FUND COURT COSTS	7495-20740		$ -			$ -
JUDICIAL SALARY FUND - COUNTY (10%)	7505-20610		$ -			$ -
JUDICIAL SALARY FUND - STATE (90%)	7505-20740		$ -			$ -
JUDICIAL SALARY FUND (CIVIL & PROBATE) - STATE	7505-20740-005	$ -			$ -	$ -
TRAFFIC LOCAL (ADMINISTRATIVE FEES)	7538-22884,1000-44359		$ 0.86			$ 0.86
COURT COST APPEAL OF TRAFFIC REG (JP APPEAL)	7538-22885					$ -
BIRTH - STATE	7855-20780			$ 199.80		$ 199.80
INFORMAL MARRIAGES - STATE	7855-20782			$ 12.50		$ 12.50
JUDICIAL FEE	7855-20786	$ -		$ -	$ -	$ -
FORMAL MARRIAGES - STATE	7855-20788			$ 180.00		$ 180.00
NONDISCLOSURE FEE - STATE	7855-20790	$ -	$ -	$ -	$ -	$ -
TCLEOSE COURT COST - COUNTY (10%)	7856-20610		$ -			$ -
TCLEOSE COURT COST - STATE (90%)	7856-20740		$ -			$ -
JURY REIMBURSEMENT FEE -COUNTY (10%	7857-20610		$ -			$ -
JURY REIMBURSEMENT FEE -STATE (90%)	7857-20740		$ -			$ -
CONSOLIDATED CRT COSTS - STATE (PR, FAM, CV) SB41	7858-20740	$ -			$ 274.00	$ 274.00
STATE TRAFFIC FINE - COUNTY (5%)	7860-20610		$ -			$ -
STATE TRAFFIC FINE - STATE (95%)	7860-20740		$ -			$ -
STATE TRAFFIC FINE - COUNTY (4%) 9/1/2019	7860-20610		$ 0.57			$ 0.57
STATE TRAFFIC FINE - STATE (96%) 9/1/2019	7860-20740		$ 13.62			$ 13.62

CALHOUN COUNTY CLERK
MONTHLY REPORT RECAPITUATION

JUNE 2024

DESC	GL CODE	CIVIL/FAMILY	CRIMINAL	OFFICIAL PUBLIC RECORDS	PROBATE	TOTAL
INDIGENT DEFENSE FEE - CRIMINAL - COUNTY (10%)	7865-20610		$ -			$ -
INDIGENT DEFENSE FEE - CRIMINAL - STATE (90%)	7865-20740		$ -			$ -
TIME PAYMENT - COUNTY (50%)	7950-20610		$ -			$ -
TIME PAYMENT - STATE (50%)	7950-20740		$ -			$ -
BAIL JUMPING AND FAILURE TO APPEAR - COUNTY	7970-20610					$ -
BAIL JUMPING AND FAILURE TO APPEAR - STATE	7970-20740					$ -
DUE PORT LAVACA PD	9990-99991		$ 5.25			$ 5.25
DUE SEADRIFT PD	9990-99992		$ -			$ -
DUE TO POINT COMFORT PD	9990-99993		$ -			$ -
DUE TO TEXAS PARKS & WILDLIFE	9990-99994		$ -			$ -
DUE TO TEXAS PARKS & WILDLIFE WATER SAFETY	9990-99995					$ -
DUE TO TABC	9990-99996					$ -
DUE TO ATTORNEY AD LITEMS	9990-99997					$ -
DUE TO OPERATING/NSF CHARGES/DUE TO OTHERS	7120-20759	$ -	$ -	$ (430.50)	$ 1,000.00	$ 569.50
		$ 448.00	$ 4,220.00	$ 16,671.25	$ 4,868.00	$ 26,207.25
TOTAL FUNDS COLLECTED		$ 26,207.25				-
FUNDS HELD IN ESCROW:		$ -	AMOUNT DUE TO TREASURER (2DR'S):			$ 25,632.50
TOTAL RECEIPTS:		$ 26,207.25	AMOUNT DUE TO OTHERS (LESS SF'S):			$ 574.75

REGISTRY DEPOSITS, CASH BONDS, AND CERTIFICATES OF DEPOSIT

CASH ON HAND, REGISTRY OF COURT FUNDS (PROSPERITY)				
BEGINNING BOOK BALANCE	5/31/2024	$ 50,493.62		
FUND RECEIVED		$ 7,540.00	**BALANCE OF CASH BONDS**	$ 49,562.50
DISBURSEMENTS		$ (1,000.00)		
ENDING BOOK BALANCE	6/30/2024	$ 57,033.62	**OTHER REGISTRY ITEMS**	$ 7,496.12
			IBC CASH BOND CHECKS	$ (25.00)
BANK RECONCILIATION REGISTRY OF COURT FUNDS				
ENDING BANK BALANCE	6/30/2024	$ 66,338.62	**TOTAL REGISTRY FUNDS**	$ 57,033.62
OUTSTANDING DEPOSITS**		$ -		
OUTSTANDING CHECKS**		$ (9,305.00)	*Reconciled:*	$ -
RECONCILED BANK BALANCE	6/30/2024	$ 57,033.62		
BB OFF $5K - CK#5724 ENTERED WRONG		$ -		

CERTIFICATES OF DEPOSITS HELD IN TRUST - PROSPERITY BANK

CD'S	Date Issued	Balance 5/31/2024	Purchases/ Interest	Withdrawals	Balance 06/30/24
10440	1/24/2018	$ -		$ -	$ -
10441	1/24/2018	$ -			$ -
10442	1/24/2018	$ 1,315.39			$ 1,315.39
10443	1/25/2018	$ 1,315.39			$ 1,315.39
10444	1/25/2018	$ 9,933.43			$ 9,933.43
10445	1/25/2018	$ 9,933.43			$ 9,933.43
10446	1/25/2018	$ 9,933.43			$ 9,933.43
10449	6/9/1955	$ 21,079.02			$ 21,079.02
10454	3/2/2018	$ -			$ -
10455	3/2/2018	$ -			$ -
10486	8/26/2020	$ 6,096.04			$ 6,096.04
10495	12/22/2021	$ 35,243.30	$ 252.48		$ 35,495.78
10496	12/22/2021	$ 35,243.28	$ 252.48		$ 35,495.76
10504	2/14/2023	$ 11,316.80			$ 11,316.80
10505	2/14/2023	$ 9,601.00			$ 9,601.00
	TOTALS:	$ 151,010.51	$ 504.96	$ -	$ 151,515.47
					$ -

Anna M. Goodman 7/15/2024

Submitted by: Anna M Goodman, County Clerk — Date

Richard Meyer 7-24-2024

Richard Meyer, Calhoun County Judge — Date

15

15. Consider and take necessary action on any necessary budget adjustments. (RHM)

RESULT:	**APPROVED [UNANIMOUS]**
MOVER:	Gary Reese, Commissioner Pct 4
SECONDER:	Joel Behrens, Commissioner Pct 3
AYES:	Judge Meyer, Commissioner Hall, Lyssy, Behrens, Reese

COMMISSIONERS' COURT BUDGET ADJUSTMENT APPROVAL LIST

HEARING DATE: Wednesday, July 24, 2024 HEARING TYPE: REGULAR BUDGET YEAR: 2024

FUND NAME GENERAL FUND *FUND NO: 1000*

DEPARTMENT NAME: BUILDING MAINTENANCE DEPARTMENT NO: 170

AMENDMENT NO: 6751 ***REQUESTOR: COUNTY AUDITOR/OVERDRAWN***

AMENDMENT REASON: OVERDRAWN ACCOUNTS

ACCT NO	ACCT NAME	GRANT NO	GRANT NAME	REVENUE INCREASE	REVENUE DECREASE	EXPENDITURE INCREASE	EXPENDITURE DECREASE	FUND BAL INCREASE (DECREASE)
51613	OVERTIME BASE PAY	999	NO GRANT	$0	$0	$318	$0	($318)
51616	OVERTIME PREMIUM PAY	999	NO GRANT	$0	$0	$411	$0	($411)
53995	UNIFORMS	999	NO GRANT	$0	$0	$0	$729	$729
			AMENDMENT NO 6751 TOTAL	**$0**	**$0**	**$729**	**$729**	**$0**
			BUILDING MAINTENANCE TOTAL	**$0**	**$0**	**$729**	**$729**	**$0**

DEPARTMENT NAME: COMMISSIONERS COURT DEPARTMENT NO: 230

AMENDMENT NO: 6747 ***REQUESTOR: COMMISSIONER'S COURT***

AMENDMENT REASON: LINE ITEM ADJUSTMENT

ACCT NO	ACCT NAME	GRANT NO	GRANT NAME	REVENUE INCREASE	REVENUE DECREASE	EXPENDITURE INCREASE	EXPENDITURE DECREASE	FUND BAL INCREASE (DECREASE)
70750	CAPITAL OUTLAY	999	NO GRANT	$0	$0	$32,100	$0	($32,100)
73302	LAND	999	NO GRANT	$0	$0	$25,400	$0	($25,400)
			AMENDMENT NO 6747 TOTAL	**$0**	**$0**	**$57,500**	**$0**	**($57,500)**
			COMMISSIONERS COURT TOTAL	**$0**	**$0**	**$57,500**	**$0**	**($57,500)**

DEPARTMENT NAME: COUNTY CLERK DEPARTMENT NO: 250

COMMISSIONERS' COURT BUDGET ADJUSTMENT APPROVAL LIST

HEARING DATE: Wednesday, July 24, 2024 — HEARING TYPE: REGULAR — BUDGET YEAR: 2024

FUND NAME GENERAL FUND — *FUND NO: 1000*

DEPARTMENT NAME: COUNTY CLERK — DEPARTMENT NO: 250

AMENDMENT NO: 6751 — ***REQUESTOR: COUNTY AUDITOR/OVERDRAWN***

AMENDMENT REASON: **OVERDRAWN ACCOUNTS**

ACCT NO	ACCT NAME	GRANT NO	GRANT NAME	REVENUE INCREASE	REVENUE DECREASE	EXPENDITURE INCREASE	EXPENDITURE DECREASE	FUND BAL INCREASE (DECREASE)
63830	MICROFILMING	999	NO GRANT	$0	$0	$0	$100	$100
63920	MISCELLANEOUS	999	NO GRANT	$0	$0	$100	$0	($100)
			AMENDMENT NO 6751 TOTAL	**$0**	**$0**	**$100**	**$100**	**$0**
			COUNTY CLERK TOTAL	**$0**	**$0**	**$100**	**$100**	**$0**

DEPARTMENT NAME: COUNTY TREASURER — DEPARTMENT NO: 210

AMENDMENT NO: 6751 — ***REQUESTOR: COUNTY AUDITOR/OVERDRAWN***

AMENDMENT REASON: **OVERDRAWN ACCOUNTS**

ACCT NO	ACCT NAME	GRANT NO	GRANT NAME	REVENUE INCREASE	REVENUE DECREASE	EXPENDITURE INCREASE	EXPENDITURE DECREASE	FUND BAL INCREASE (DECREASE)
53020	OFFICE SUPPLIES	999	NO GRANT	$0	$0	$500	$0	($500)
66316	TRAINING TRAVEL OUT OF COUNTY	999	NO GRANT	$0	$0	$0	$500	$500
			AMENDMENT NO 6751 TOTAL	**$0**	**$0**	**$500**	**$500**	**$0**
			COUNTY TREASURER TOTAL	**$0**	**$0**	**$500**	**$500**	**$0**

DEPARTMENT NAME: DISTRICT COURT — DEPARTMENT NO: 430

AMENDMENT NO: 6751 — ***REQUESTOR: COUNTY AUDITOR/OVERDRAWN***

AMENDMENT REASON: **OVERDRAWN ACCOUNTS**

ACCT NO	ACCT NAME	GRANT NO	GRANT NAME	REVENUE INCREASE	REVENUE DECREASE	EXPENDITURE INCREASE	EXPENDITURE DECREASE	FUND BAL INCREASE (DECREASE)

COMMISSIONERS' COURT BUDGET ADJUSTMENT APPROVAL LIST

HEARING DATE: Wednesday, July 24, 2024 HEARING TYPE: REGULAR BUDGET YEAR: 2024

FUND NAME GENERAL FUND *FUND NO: 1000*

DEPARTMENT NAME: DISTRICT COURT DEPARTMENT NO: 430

AMENDMENT NO: 6751 ***REQUESTOR: COUNTY AUDITOR/OVERDRAWN***

AMENDMENT REASON: OVERDRAWN ACCOUNTS

ACCT NO	ACCT NAME	GRANT NO	GRANT NAME	REVENUE INCREASE	REVENUE DECREASE	EXPENDITURE INCREASE	EXPENDITURE DECREASE	FUND BAL INCREASE (DECREASE)
51534	JURORS-GRAND	999	NO GRANT	$0	$0	$1,560	$0	($1,560)
60053	ADULT ASSIGNED-OTHER LITIGATIO	999	NO GRANT	$0	$0	$0	$1,560	$1,560
			AMENDMENT NO 6751 TOTAL	**$0**	**$0**	**$1,560**	**$1,560**	**$0**
			DISTRICT COURT TOTAL	**$0**	**$0**	**$1,560**	**$1,560**	**$0**

DEPARTMENT NAME: EMERGENCY MEDICAL SERVICES DEPARTMENT NO: 345

AMENDMENT NO: 6750 ***REQUESTOR: EMS***

AMENDMENT REASON: INSURANCE PROCEEDS FROM VFIS FOR 3/15/24 ACCIDENT. APROVED IN CC 7/24/24

ACCT NO	ACCT NAME	GRANT NO	GRANT NAME	REVENUE INCREASE	REVENUE DECREASE	EXPENDITURE INCREASE	EXPENDITURE DECREASE	FUND BAL INCREASE (DECREASE)
65464	REPAIRS-INSURANCE RECOVERY	999	NO GRANT	$0	$0	$1,482	$0	($1,482)
			AMENDMENT NO 6750 TOTAL	**$0**	**$0**	**$1,482**	**$0**	**($1,482)**
			EMERGENCY MEDICAL SERVICES TOTAL	**$0**	**$0**	**$1,482**	**$0**	**($1,482)**

DEPARTMENT NAME: FIRE PROTECTION-SIX MILE DEPARTMENT NO: 695

AMENDMENT NO: 6751 ***REQUESTOR: COUNTY AUDITOR/OVERDRAWN***

AMENDMENT REASON: OVERDRAWN ACCOUNTS

ACCT NO	ACCT NAME	GRANT NO	GRANT NAME	REVENUE INCREASE	REVENUE DECREASE	EXPENDITURE INCREASE	EXPENDITURE DECREASE	FUND BAL INCREASE (DECREASE)
53992	SUPPLIES-MISCELLANEOUS	999	NO GRANT	$0	$0	$0	$122	$122

COMMISSIONERS' COURT BUDGET ADJUSTMENT APPROVAL LIST

HEARING DATE: Wednesday, July 24, 2024 HEARING TYPE: REGULAR BUDGET YEAR: 2024

FUND NAME GENERAL FUND *FUND NO: 1000*

DEPARTMENT NAME: FIRE PROTECTION-SIX MILE DEPARTMENT NO: 695

AMENDMENT NO: 6751	*REQUESTOR: COUNTY AUDITOR/OVERDRAWN*
AMENDMENT REASON:	**OVERDRAWN ACCOUNTS**

ACCT NO	ACCT NAME	GRANT NO	GRANT NAME	REVENUE INCREASE	REVENUE DECREASE	EXPENDITURE INCREASE	EXPENDITURE DECREASE	FUND BAL INCREASE (DECREASE)
65740	SERVICES	999	NO GRANT	$0	$0	$122	$0	($122)
			AMENDMENT NO 6751 TOTAL	$0	$0	$122	$122	$0
			FIRE PROTECTION-SIX MILE TOTAL	$0	$0	$122	$122	$0

DEPARTMENT NAME: HUMAN RESOURCES DEPARTMENT NO: 265

AMENDMENT NO: 6751	*REQUESTOR: COUNTY AUDITOR/OVERDRAWN*
AMENDMENT REASON:	**OVERDRAWN ACCOUNTS**

ACCT NO	ACCT NAME	GRANT NO	GRANT NAME	REVENUE INCREASE	REVENUE DECREASE	EXPENDITURE INCREASE	EXPENDITURE DECREASE	FUND BAL INCREASE (DECREASE)
66192	TELEPHONE SERVICES	999	NO GRANT	$0	$0	$500	$0	($500)
66310	TRAINING REGISTRATION FEES/TRA	999	NO GRANT	$0	$0	$0	$500	$500
			AMENDMENT NO 6751 TOTAL	$0	$0	$500	$500	$0
			HUMAN RESOURCES TOTAL	$0	$0	$500	$500	$0

DEPARTMENT NAME: JAIL DEPARTMENT NO: 180

AMENDMENT NO: 6751	*REQUESTOR: COUNTY AUDITOR/OVERDRAWN*
AMENDMENT REASON:	**OVERDRAWN ACCOUNTS**

ACCT NO	ACCT NAME	GRANT NO	GRANT NAME	REVENUE INCREASE	REVENUE DECREASE	EXPENDITURE INCREASE	EXPENDITURE DECREASE	FUND BAL INCREASE (DECREASE)
50363	DEPUTY JAILER	999	NO GRANT	$0	$0	$0	$13,455	$13,455

COMMISSIONERS' COURT BUDGET ADJUSTMENT APPROVAL LIST

HEARING DATE: Wednesday, July 24, 2024 HEARING TYPE: REGULAR BUDGET YEAR: 2024

FUND NAME GENERAL FUND *FUND NO: 1000*

DEPARTMENT NAME: JAIL DEPARTMENT NO: 180

AMENDMENT NO: 6751 ***REQUESTOR: COUNTY AUDITOR/OVERDRAWN***

AMENDMENT REASON: OVERDRAWN ACCOUNTS

ACCT NO	ACCT NAME	GRANT NO	GRANT NAME	REVENUE INCREASE	REVENUE DECREASE	EXPENDITURE INCREASE	EXPENDITURE DECREASE	FUND BAL INCREASE (DECREASE)
51613	OVERTIME BASE PAY	999	NO GRANT	$0	$0	$7,757	$0	($7,757)
51616	OVERTIME PREMIUM PAY	999	NO GRANT	$0	$0	$3,876	$0	($3,876)
51620	ADDITIONAL PAY-REGULAR RATE	999	NO GRANT	$0	$0	$1,822	$0	($1,822)
			AMENDMENT NO 6751 TOTAL	$0	$0	$13,455	$13,455	$0
			JAIL TOTAL	$0	$0	$13,455	$13,455	$0

DEPARTMENT NAME: JUSTICE OF PEACE-PRECINCT #1 DEPARTMENT NO: 450

AMENDMENT NO: 6751 ***REQUESTOR: COUNTY AUDITOR/OVERDRAWN***

AMENDMENT REASON: OVERDRAWN ACCOUNTS

ACCT NO	ACCT NAME	GRANT NO	GRANT NAME	REVENUE INCREASE	REVENUE DECREASE	EXPENDITURE INCREASE	EXPENDITURE DECREASE	FUND BAL INCREASE (DECREASE)
64230	OMNIBASE PROGRAM SERVICES	999	NO GRANT	$0	$0	$93	$0	($93)
64790	POSTAGE	999	NO GRANT	$0	$0	$0	$93	$93
			AMENDMENT NO 6751 TOTAL	$0	$0	$93	$93	$0
			JUSTICE OF PEACE-PRECINCT #1 TOTAL	$0	$0	$93	$93	$0

DEPARTMENT NAME: JUSTICE OF PEACE-PRECINCT #2 DEPARTMENT NO: 460

COMMISSIONERS' COURT BUDGET ADJUSTMENT APPROVAL LIST

HEARING DATE: Wednesday, July 24, 2024 **HEARING TYPE: REGULAR** **BUDGET YEAR: 2024**

FUND NAME GENERAL FUND *FUND NO: 1000*

DEPARTMENT NAME: JUSTICE OF PEACE-PRECINCT #2 DEPARTMENT NO: 460

AMENDMENT NO: 6751 ***REQUESTOR: COUNTY AUDITOR/OVERDRAWN***

AMENDMENT REASON: OVERDRAWN ACCOUNTS

ACCT NO	ACCT NAME	GRANT NO	GRANT NAME	REVENUE INCREASE	REVENUE DECREASE	EXPENDITURE INCREASE	EXPENDITURE DECREASE	FUND BAL INCREASE (DECREASE)
64230	OMNIBASE PROGRAM SERVICES	999	NO GRANT	$0	$0	$84	$0	($84)
64790	POSTAGE	999	NO GRANT	$0	$0	$0	$84	$84
			AMENDMENT NO 6751 TOTAL	$0	$0	$84	$84	$0
			JUSTICE OF PEACE-PRECINCT #2 TOTAL	$0	$0	$84	$84	$0

DEPARTMENT NAME: LIBRARY DEPARTMENT NO: 140

AMENDMENT NO: 6751 ***REQUESTOR: COUNTY AUDITOR/OVERDRAWN***

AMENDMENT REASON: OVERDRAWN ACCOUNTS

ACCT NO	ACCT NAME	GRANT NO	GRANT NAME	REVENUE INCREASE	REVENUE DECREASE	EXPENDITURE INCREASE	EXPENDITURE DECREASE	FUND BAL INCREASE (DECREASE)
50680	LIBRARIANS-PART-TIME	999	NO GRANT	$0	$0	$0	$2,500	$2,500
51540	TEMPORARY	999	NO GRANT	$0	$0	$2,500	$0	($2,500)
			AMENDMENT NO 6751 TOTAL	$0	$0	$2,500	$2,500	$0
			LIBRARY TOTAL	$0	$0	$2,500	$2,500	$0

DEPARTMENT NAME: MUSEUM DEPARTMENT NO: 150

AMENDMENT NO: 6747 ***REQUESTOR: COMMISSIONER'S COURT***

AMENDMENT REASON: LINE ITEM ADJUSTMENT

ACCT NO	ACCT NAME	GRANT NO	GRANT NAME	REVENUE INCREASE	REVENUE DECREASE	EXPENDITURE INCREASE	EXPENDITURE DECREASE	FUND BAL INCREASE (DECREASE)

COMMISSIONERS' COURT BUDGET ADJUSTMENT APPROVAL LIST

HEARING DATE: Wednesday, July 24, 2024 **HEARING TYPE:** REGULAR **BUDGET YEAR:** 2024

FUND NAME GENERAL FUND *FUND NO: 1000*

DEPARTMENT NAME: MUSEUM — DEPARTMENT NO: 150

AMENDMENT NO: 6747 ***REQUESTOR: COMMISSIONER'S COURT***

AMENDMENT REASON: LINE ITEM ADJUSTMENT

ACCT NO	ACCT NAME	GRANT NO	GRANT NAME	REVENUE INCREASE	REVENUE DECREASE	EXPENDITURE INCREASE	EXPENDITURE DECREASE	FUND BAL INCREASE (DECREASE)
65472	REPAIRS-MUSEUM	999	NO GRANT	$0	$0	$0	$57,500	$57,500
			AMENDMENT NO 6747 TOTAL	$0	$0	$0	$57,500	$57,500
			MUSEUM TOTAL	$0	$0	$0	$57,500	$57,500

DEPARTMENT NAME: REVENUE — DEPARTMENT NO: 1

AMENDMENT NO: 6750 ***REQUESTOR: EMS***

AMENDMENT REASON: INSURANCE PROCEEDS FROM VFIS FOR 3/15/24 ACCIDENT. APROVED IN CC 7/24/24

ACCT NO	ACCT NAME	GRANT NO	GRANT NAME	REVENUE INCREASE	REVENUE DECREASE	EXPENDITURE INCREASE	EXPENDITURE DECREASE	FUND BAL INCREASE (DECREASE)
49150	RECOVERIES-INSURANCE	999	NO GRANT	$1,482	$0	$0	$0	$1,482
			AMENDMENT NO 6750 TOTAL	$1,482	$0	$0	$0	$1,482
			REVENUE TOTAL	$1,482	$0	$0	$0	$1,482

DEPARTMENT NAME: ROAD AND BRIDGE-PRECINCT #1 — DEPARTMENT NO: 540

AMENDMENT NO: 6748 ***REQUESTOR: COMMISSIONER PRECINCT #1***

AMENDMENT REASON: LINE ITEM ADJUSTMENT

ACCT NO	ACCT NAME	GRANT NO	GRANT NAME	REVENUE INCREASE	REVENUE DECREASE	EXPENDITURE INCREASE	EXPENDITURE DECREASE	FUND BAL INCREASE (DECREASE)
53510	ROAD & BRIDGE SUPPLIES	999	NO GRANT	$0	$0	$0	$2,000	$2,000
53610	BUILDING SUPPLIES/PARTS	999	NO GRANT	$0	$0	$2,000	$0	($2,000)

COMMISSIONERS' COURT BUDGET ADJUSTMENT APPROVAL LIST

HEARING DATE: Wednesday, July 24, 2024 HEARING TYPE: REGULAR BUDGET YEAR: 2024

FUND NAME GENERAL FUND *FUND NO: 1000*

DEPARTMENT NAME: ROAD AND BRIDGE-PRECINCT #1 DEPARTMENT NO: 540

AMENDMENT NO: 6748 ***REQUESTOR: COMMISSIONER PRECINCT #1***

AMENDMENT REASON: LINE ITEM ADJUSTMENT

ACCT NO	ACCT NAME	GRANT NO	GRANT NAME	REVENUE INCREASE	REVENUE DECREASE	EXPENDITURE INCREASE	EXPENDITURE DECREASE	FUND BAL INCREASE (DECREASE)
			AMENDMENT NO 6748 TOTAL	$0	$0	$2,000	$2,000	$0

AMENDMENT NO: 6751 ***REQUESTOR: COUNTY AUDITOR/OVERDRAWN***

AMENDMENT REASON: OVERDRAWN ACCOUNTS

ACCT NO	ACCT NAME	GRANT NO	GRANT NAME	REVENUE INCREASE	REVENUE DECREASE	EXPENDITURE INCREASE	EXPENDITURE DECREASE	FUND BAL INCREASE (DECREASE)
51630	COMP TIME PAY	999	NO GRANT	$0	$0	$2,565	$0	($2,565)
51740	VACATION PAY ON TERMINATION	999	NO GRANT	$0	$0	$1,745	$0	($1,745)
53510	ROAD & BRIDGE SUPPLIES	999	NO GRANT	$0	$0	$0	$4,310	$4,310
			AMENDMENT NO 6751 TOTAL	$0	$0	$4,310	$4,310	$0
			ROAD AND BRIDGE-PRECINCT #1 TOTAL	$0	$0	$6,310	$6,310	$0

DEPARTMENT NAME: ROAD AND BRIDGE-PRECINCT #2 DEPARTMENT NO: 550

AMENDMENT NO: 6751 ***REQUESTOR: COUNTY AUDITOR/OVERDRAWN***

AMENDMENT REASON: OVERDRAWN ACCOUNTS

ACCT NO	ACCT NAME	GRANT NO	GRANT NAME	REVENUE INCREASE	REVENUE DECREASE	EXPENDITURE INCREASE	EXPENDITURE DECREASE	FUND BAL INCREASE (DECREASE)
51540	TEMPORARY	999	NO GRANT	$0	$0	$4,591	$0	($4,591)
51545	PART-TIME EMPLOYEES	999	NO GRANT	$0	$0	$378	$0	($378)
51613	OVERTIME BASE PAY	999	NO GRANT	$0	$0	$1,352	$0	($1,352)
51616	OVERTIME PREMIUM PAY	999	NO GRANT	$0	$0	$676	$0	($676)
51630	COMP TIME PAY	999	NO GRANT	$0	$0	$5,436	$0	($5,436)

COMMISSIONERS' COURT BUDGET ADJUSTMENT APPROVAL LIST

HEARING DATE: Wednesday, July 24, 2024 **HEARING TYPE: REGULAR** **BUDGET YEAR: 2024**

FUND NAME GENERAL FUND *FUND NO: 1000*

DEPARTMENT NAME: ROAD AND BRIDGE-PRECINCT #2 DEPARTMENT NO: 550

AMENDMENT NO: 6751 ***REQUESTOR: COUNTY AUDITOR/OVERDRAWN***

AMENDMENT REASON: OVERDRAWN ACCOUNTS

ACCT NO	ACCT NAME	GRANT NO	GRANT NAME	REVENUE INCREASE	REVENUE DECREASE	EXPENDITURE INCREASE	EXPENDITURE DECREASE	FUND BAL INCREASE (DECREASE)
53510	ROAD & BRIDGE SUPPLIES	999	NO GRANT	$0	$0	$0	$12,433	$12,433
			AMENDMENT NO 6751 TOTAL	**$0**	**$0**	**$12,433**	**$12,433**	**$0**
			ROAD AND BRIDGE-PRECINCT #2 TOTAL	**$0**	**$0**	**$12,433**	**$12,433**	**$0**

DEPARTMENT NAME: ROAD AND BRIDGE-PRECINCT #3 DEPARTMENT NO: 560

AMENDMENT NO: 6751 ***REQUESTOR: COUNTY AUDITOR/OVERDRAWN***

AMENDMENT REASON: OVERDRAWN ACCOUNTS

ACCT NO	ACCT NAME	GRANT NO	GRANT NAME	REVENUE INCREASE	REVENUE DECREASE	EXPENDITURE INCREASE	EXPENDITURE DECREASE	FUND BAL INCREASE (DECREASE)
51540	TEMPORARY	999	NO GRANT	$0	$0	$7,804	$0	($7,804)
53510	ROAD & BRIDGE SUPPLIES	999	NO GRANT	$0	$0	$0	$11,904	$11,904
53610	BUILDING SUPPLIES/PARTS	999	NO GRANT	$0	$0	$4,100	$0	($4,100)
			AMENDMENT NO 6751 TOTAL	**$0**	**$0**	**$11,904**	**$11,904**	**$0**
			ROAD AND BRIDGE-PRECINCT #3 TOTAL	**$0**	**$0**	**$11,904**	**$11,904**	**$0**

DEPARTMENT NAME: ROAD AND BRIDGE-PRECINCT #4 DEPARTMENT NO: 570

AMENDMENT NO: 6749 ***REQUESTOR: COMMISSIONER PRECINCT #4***

AMENDMENT REASON: LINE ITEM ADJUSTMENT

ACCT NO	ACCT NAME	GRANT NO	GRANT NAME	REVENUE INCREASE	REVENUE DECREASE	EXPENDITURE INCREASE	EXPENDITURE DECREASE	FUND BAL INCREASE (DECREASE)

COMMISSIONERS' COURT BUDGET ADJUSTMENT APPROVAL LIST

HEARING DATE: Wednesday, July 24, 2024 HEARING TYPE: REGULAR BUDGET YEAR: 2024

FUND NAME GENERAL FUND *FUND NO: 1000*

DEPARTMENT NAME: ROAD AND BRIDGE-PRECINCT #4 DEPARTMENT NO: 570

AMENDMENT NO: 6749 ***REQUESTOR: COMMISSIONER PRECINCT #4***

AMENDMENT REASON: LINE ITEM ADJUSTMENT

ACCT NO	ACCT NAME	GRANT NO	GRANT NAME	REVENUE INCREASE	REVENUE DECREASE	EXPENDITURE INCREASE	EXPENDITURE DECREASE	FUND BAL INCREASE (DECREASE)
53510	ROAD & BRIDGE SUPPLIES	999	NO GRANT	$0	$0	$0	$12,000	$12,000
53630	INSECTICIDES/PESTICIDES	999	NO GRANT	$0	$0	$5,000	$0	($5,000)
70750	CAPITAL OUTLAY	999	NO GRANT	$0	$0	$7,000	$0	($7,000)
			AMENDMENT NO 6749 TOTAL	**$0**	**$0**	**$12,000**	**$12,000**	**$0**
			ROAD AND BRIDGE-PRECINCT #4 TOTAL	**$0**	**$0**	**$12,000**	**$12,000**	**$0**

DEPARTMENT NAME: SHERIFF DEPARTMENT NO: 760

AMENDMENT NO: 6751 ***REQUESTOR: COUNTY AUDITOR/OVERDRAWN***

AMENDMENT REASON: OVERDRAWN ACCOUNTS

ACCT NO	ACCT NAME	GRANT NO	GRANT NAME	REVENUE INCREASE	REVENUE DECREASE	EXPENDITURE INCREASE	EXPENDITURE DECREASE	FUND BAL INCREASE (DECREASE)
50365	DEPUTY SHERIFF	999	NO GRANT	$0	$0	$0	$2,365	$2,365
51740	VACATION PAY ON TERMINATION	999	NO GRANT	$0	$0	$2,365	$0	($2,365)
			AMENDMENT NO 6751 TOTAL	**$0**	**$0**	**$2,365**	**$2,365**	**$0**
			SHERIFF TOTAL	**$0**	**$0**	**$2,365**	**$2,365**	**$0**
			GENERAL FUND TOTAL	***$1,482***	***$0***	***$123,637***	***$122,155***	***$0***
			Grand Total	***$1,482***	***$0***	***$123,637***	***$122,155***	***$0***

16

16. Approval of bills and payroll. (RHM)

MMC Bills:

RESULT:	**APPROVED [UNANIMOUS]**
MOVER:	David Hall, Commissioner Pct 1
SECONDER:	Vern Lyssy, Commissioner Pct 2
AYES:	Judge Meyer, Commissioner Hall, Lyssy, Behrens, Reese

County Bills:

RESULT:	**APPROVED [UNANIMOUS]**
MOVER:	David Hall, Commissioner Pct 1
SECONDER:	Vern Lyssy, Commissioner Pct 2
AYES:	Judge Meyer, Commissioner Hall, Lyssy, Behrens, Reese

Adjourned 10:45am

MEMORIAL MEDICAL CENTER

COMMISSIONERS COURT APPROVAL LIST FOR ---July 24, 2024

TOTALS TO BE APPROVED - TRANSFERRED FROM ATTACHED PAGES

TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS	**$**	**234,423.57**
TOTAL TRANSFERS BETWEEN FUNDS	**$**	**186,501.97**
TOTAL NURSING HOME UPL EXPENSES	**$**	**798,247.82**
TOTAL INTER-GOVERNMENT TRANSFERS	**$**	**-**
GRAND TOTAL DISBURSEMENTS APPROVED July 24, 2024	**$**	**1,219,173.36**

APPROVAL LIST - 2024 BUDGET

COMMISSIONERS COURT MEETING OF **07/24/24**

BALANCE BROUGHT FORWARD FROM APPROVAL LIST REPORT **PAGE 22**				$359,730.07
FICA	**PAYROLL 7/19/2024**	P/R	$	71,340.96
MEDICARE	**PAYROLL 7/19/2024**	P/R	$	16,684.50
FWH	**PAYROLL 7/19/2024**	P/R	$	49,092.52
NATIONWIDE RETIREMENT SOLUTIONS	**PAYROLL 7/19/2024**	P/R	$	1,862.50
OFFICE OF THE ATTORNEY GENERAL - CHILD SUPPORT	**PAYROLL 7/19/2024**	P/R	$	2,897.68
VOYA	**PAYROLL 7/19/2024**	P/R	$	1,850.00
CITIBANK	**DEPT CREDIT CARD CHARGES**	A/P	$	58,395.17
STATE COMPTROLLER	**2024 2ND QTR SALES TAX - MUSEUM**	A/P	$	43.11
STATE COMPTROLLER	**2024 2ND QTR SALES TAX - LANDFILL**	A/P	$	875.01
	TOTAL VENDOR DISBURSEMENTS:		**$**	**562,771.52**
WASTE MGMT TO GENERAL FUND - SALES TAX FY2024 Q2			**$**	**4.37**
MUSEUM TO GENERAL FUND - SALES TAX FY2024 Q2			**$**	**0.22**
	TOTAL GOVT. INTERFUND TRANSFER AMOUNT:		**$**	**4.59**
	TOTAL AMOUNT FOR APPROVAL:		**$**	**562,776.11**

CALHOUN COUNTY, TEXAS
Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 07.24.24
1000 - GENERAL FUND

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
BUILDING MAINTENANCE	170	BUILDING SUPPLIES/PARTS	53610	GULF COAST HARDWARE LLC	63196	190275	MAINT 7/10 METAL REPAIR TAPE, (3) WEATHER STRIPS	36.96	
			53610	GULF COAST HARDWARE LLC	63196	190283	MAINT 7/10 LOCKNUT, WASHERS, ROUND COVER BOX	8.14	
			53610	GULF COAST HARDWARE LLC	63196	190331	MAINT 7/11 (6) LINEAR LIGHT BULBS, BELT HOOK	271.83	
			53610	GULF COAST HARDWARE LLC	63196	190337	MAINT 7/11 CREDIT ON RETURN (6) BULBS, PURCH (8) BULBS		110.02
			53610	GULF COAST HARDWARE LLC	63196	190345	MAINT 7/11 CREDIT ON RETURN (8) BULBS, PURCH (2) BULBS		131.94
		JANITOR SUPPLIES	53640	GULF COAST PAPER CO INC	2619	2550838	MAINT 7/9 CLEATED CHARCOAL MAT	514.24	
		TELEPHONE SERVICES	66192	AT&T MOBILITY	5209	3615502...	MAINT 6/12 ACT# 287022659855 PHONE 5/13-6/12	219.82	
		UTILITIES-AG BLDG/FAIRGROUNDS	66602	CENTERPOINT ENERGY	1805	2942974...	BAUER 7/16 ACT# 2942974-3 CCF 0 6/13- 7/12	50.96	
			66602	CENTERPOINT ENERGY	1805	2942980...	AG BLDG 7/16 ACT# 2942980-0 CCF 1 6/13- 7/12	52.15	
			66602	CITY OF PORT LAVACA	861	1415150...	MOSQ BAUER AG 7/16 ACT# 14-1515-00 WATER 6/15- 7/15	464.72	
			66602	CITY OF PORT LAVACA	861	1415200...	MOSQ BAUER AG 7/16 ACT# 14-1520-00 WATER 6/15- 7/15	141.34	
		UTILITIES-COURTHOUSE AND JAIL	66604	CENTERPOINT ENERGY	1805	6329420...	CH 7/16 ACT# 6329420-1 CCF 365 6/13- 7/12	486.35	
			66604	CITY OF PORT LAVACA	861	1218440...	CH 7/12 ACT# 12-1844-00 WATER 6/10- 7/10	750.07	
		UTILITIES-JAIL	66605	CENTERPOINT ENERGY	1805	6455891...	JAIL 7/16 ACT# 6455891-9 MCF 193 6/13- 7/12	2,359.06	
			66605	CITY OF PORT LAVACA	861	1218420...	JAIL 7/12 ACT# 12-1842-01 WATER 6/10- 7/10	3,967.78	
			66605	CITY OF PORT LAVACA	861	1218430...	JAIL 7/12 ACT# 12-1843-00 WATER 6/10- 7/10	85.13	
		UTILITIES-COURTHOUSE ANNEX	66606	CITY OF PORT LAVACA	861	1219100...	ANNEX I 7/12 ACT# 12-1910-00 WATER 6/10- 7/10	109.34	

CALHOUN COUNTY, TEXAS
Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 07.24.24
1000 - GENERAL FUND

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
		UTILITIES-COURTHOUSE ANNEX II	66621	CITY OF PORT LAVACA	861	1208950...	ANNEX II 7/12 ACT# 12-0895-01 WATER 6/10- 7/10	67.63	
		UTILITIES-DISPATCH BUILDING	66623	CENTERPOINT ENERGY	1805	6403494...	EMER COMM 7/16 ACT# 6403494238-9 CCF 0 6/10-7/12	98.45	
		CAPITAL OUTLAY-ROOF(S)	70825	G&W ENGINEERS, INC.	2601	5310026...	MAINT 7/2 ENG/SURVEY ANNEX I ROOF	1,000.00	
BUILDING MAINTENANCE	Total 170							10,683.97	241.96
COMMISSIONERS COURT	230	INTERNET SERVICES	62955	FRONTIER COMMUNICATIONS	2855	3611970...	CH 7/11 ACT# 361-197-0053-122022-5 INTERNET 7/11-8/10	1,200.00	
		LEGAL NOTICES	63290	PORT LAVACA WAVE	62340	PO2302...	COM CRT 5/31 INVITATION TO BID AD	637.50	
		CAPITAL OUTLAY	70750	G&W ENGINEERS, INC.	2601	5310025...	COM CRT 7/2 ENG/SURVEY PKNG LOTS	3,000.00	
COMMISSIONERS COURT	Total 230							4,837.50	0.00
CONTINGENCIES	240	GROUP INSURANCE	51920	RELIANCE STANDARD LIFE	6927	PO0723...	CALCO 7/23 JULY 2024 PREMIUMS		0.08
			51920	TEXAS ASSOCIATION OF COUNTIES	7778	PO0723...	CALCO 7/23 JULY 2024 PREMIUMS		1.56
CONTINGENCIES	Total 240							0.00	1.64
COUNTY CLERK	250	MISCELLANEOUS	63920	TEXAS DEPT OF STATE HEALTH	1512	2022420	CO CLK 7/1 JUNE 2024 REMOTE BIRTH ACCESS	84.18	
COUNTY CLERK	Total 250							84.18	0.00
COUNTY JUDGE	260	TRAVEL OUT OF COUNTY	66498	MEYER RICHARD H	EM...	PO2024...	CO JUDGE 7/22 TRAVEL REIMB- BAY CITY, TX 7/19	70.35	
COUNTY JUDGE	Total 260							70.35	0.00

CALHOUN COUNTY, TEXAS
Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 07.24.24
1000 - GENERAL FUND

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
COUNTY TAX COLLECTOR	200	DELINQUENT TAX ATTORNEY FEES	61700	MCCREARY VESELKA BRAGG	5088	PODTA2...	TAX A/C 7/9 JUNE 2024 DTA FEES	3,173.82	
COUNTY TAX COLLECTOR	Total 200							3,173.82	0.00
COUNTY TREASURER	210	GENERAL OFFICE SUPPLIES	53020	QUILL LLC	6602	39276667	TREAS 6/26 ORGANIZER	195.30	
			53020	QUILL LLC	6602	39291011	TREAS 6/26 RUBBER BANDS, (3) PRE-INKED STAMPS	27.58	
COUNTY TREASURER	Total 210							222.88	0.00
DISTRICT ATTORNEY	510	GENERAL OFFICE SUPPLIES	53020	QUILL LLC	6602	39212982	DA 6/20 CHAIR, PC BATTERY BACKUP	589.73	
		COPY MACHINE LEASE	61340	XEROX CORPORATION	9001	0216085...	DA 7/1 COPIER LEASE 5/21-6/21	197.82	
			61340	XEROX CORPORATION	9001	0216085...	DA 7/1 COPIER LEASE 5/21-6/21	62.76	
		BOOKS-LAW	70500	THOMSON REUTERS - WEST	8612	8503860...	DA 7/1 JUNE 2024 WESTLAW SUBS	1,402.38	
			70500	THOMSON REUTERS - WEST	8612	8504644...	DA 7/1 JULY 2024 LIBRARY PLAN CHGS	300.40	
DISTRICT ATTORNEY	Total 510							2,553.09	0.00
DISTRICT CLERK	420	PHOTO COPIES/SUPPLIES	53030	GREAT AMERICA FINANCIAL	2751	36984464	DIST CLK 7/11 COPIER LEASE	244.00	
DISTRICT CLERK	Total 420							244.00	0.00
DISTRICT COURT	430	JURORS-PETIT	51533	RHONDA S. KOKENA	5545	PO0718...	TREAS 7/18 REIMB & INCREASE JURY CASH FUND THRU 7.19.24	520.00	
		JURORS-GRAND	51534	RHONDA S. KOKENA	5545	PO0718...	TREAS 7/18 REIMB & INCREASE JURY CASH FUND THRU 7.19.24	1,560.00	
		ADULT ASSIGNED-ATTORNEY FEES	60050	GARZA JOSEPH G	8835	2024154	DIST CRT 7/8 C# 2024-CR-8958-DC L MUNIZ	1,675.00	

CALHOUN COUNTY, TEXAS
Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 07.24.24
1000 - GENERAL FUND

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
			60050	GARZA JOSEPH G	8835	2024156	DIST CRT 7/10 C# 2021-CR-8405-DC J. TEAGUE	2,475.00	
		ADULT ASSIGNED-EXPERT WITNESS EXPENSE	60052	FORENSIC AND CLINICAL	7066	2024155	DIST CRT 7/10 C# 2020-CR-8278/8279-DC B. GUTIERREZ-VASQUEZ	800.00	
		ADULT ASSIGNED-OTHER LITIGATION EXPENSES	60053	GARZA JOSEPH G	8835	2024154	DIST CRT 7/8 C# 2024-CR-8958-DC I. MUNIZ	36.18	
			60053	GARZA JOSEPH G	8835	2024156	DIST CRT 7/10 C# 2021-CR-8405-DC J. TEAGUE	144.72	
DISTRICT COURT	Total 430							7,210.90	0.00
ELECTIONS	270	GENERAL OFFICE SUPPLIES	53020	QUILL LLC	6602	39372697	ELEC 7/2 PAPER	130.73	
ELECTIONS	Total 270							130.73	0.00
EMERGENCY MEDICAL SERVICES	345	UTILITIES	66600	CITY OF PORT LAVACA	861	1452250...	EMS 7/16 ACT# 14-5225-00 WATER 6/15- 7/15	148.16	
EMERGENCY MEDICAL SERVICES	Total 345							148.16	0.00
EXTENSION SERVICE	110	TELEPHONE SERVICES	66192	AT&T MOBILITY	5209	3619209...	EXT SVC 6/19 ACT# 287335811011 PHONE 5/20-6/19	40.71	
EXTENSION SERVICE	Total 110							40.71	0.00
FIRE PROTECTION-OLIVIA/P.. ALTO	650	SUPPLIES/OPERATING EXPENSES	53980	GULF COAST HARDWARE LLC	63193	190376	OPA VFD 7/12 PLIERS	61.98	
			53980	TRI-WHOLESALE COMPANY, INC.	7637	9301116...	OPA VFD 7/10 PRESSURE HOSE- U432	45.01	
			53980	TRI-WHOLESALE COMPANY, INC.	7637	9301116...	OPA VFD 7/11 OIL ABSORB, DRY SWEEP	92.64	
FIRE PROTECTION-OLIVIA/P.. ALTO	Total 650							199.63	0.00

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
FIRE PROTECTION-SIX MILE	695	SERVICES	65740	VICTORIA FIRE & SAFETY	8204	145449	6MILE VFD 7/2 INSPECT FIRE EXTINGUISHERS	121.75	
FIRE PROTECTION-SIX MILE	Total 695							121.75	0.00
HUMAN RESOURCES	265	MISCELLANEOUS	63920	GREAT AMERICA FINANCIAL	2751	36897354	HR 7/1 COPIER LEASE	96.21	
		TELEPHONE SERVICES	66192	FRONTIER COMMUNICATIONS	2855	3615512...	HR 7/11 ACT# 361-551-2181-011122-5 FAX 7/11- 8/10	108.16	
HUMAN RESOURCES	Total 265							204.37	0.00
INDIGENT HEALTH CARE	360	BURIAL EXPENSE	60550	VICTORIA MORTUARY SERVICE INC	8238	240706	INDIGENT 7/15 CREMATION- C. MCBRIDE	600.00	
		SOFTWARE SERVICES	65838	INDIGENT HEALTHCARE SOLUTIONS	5710	77996	INDIGENT HLTH CARE 7/1 AUG 2024 SOFTWARE SVCS	1,961.00	
INDIGENT HEALTH CARE	Total 360							2,561.00	0.00
INFORMATION TECHNOLOGY	275	TELEPHONE SERVICES	66192	AT&T MOBILITY	5209	3615539...	IT 6/19 ACT# 287289192983 PHONE 5/20- 6/19	121.38	
		UTILITIES-117 W. ASH ST. BUILDING	66609	CITY OF PORT LAVACA	861	1213400...	IT 7/12 ACT# 12-1340-00 WATER 6/10- 7/10	67.63	
INFORMATION TECHNOLOGY	Total 275							189.01	0.00
JAIL OPERATIONS	180	GENERAL OFFICE SUPPLIES	53020	QUILL LLC	6602	39248357	JAIL 6/24 DESK CALENDAR	6.79	
		JAIL MAINTENANCE/SUPPLIES	53420	CHARM-TEX INC	1177	0368028...	JAIL 6/24 MOP HANDLES	519.00	
		PRISONER CLOTHING/SUPPLIES	53460	QUILL LLC	6602	39167252	JAIL 6/18 INMATE PAPER	49.20	
			53460	QUILL LLC	6602	39172255	JAIL 6/18 INMATE ENVELOPES	207.90	
		COPIER RENTALS	61310	RICOH USA, INC.	34270	1084190...	JAIL 7/5 JULY 2024 COPIER LEASE	288.67	

CALHOUN COUNTY, TEXAS

Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 07.24.24

1000 - GENERAL FUND

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
		MISCELLANEOUS	63920	LANGUAGE LINE SERVICES INC	9982	11339282	JAIL 6/30 INTERPRETER SVCS	49.70	
		POSTAGE	64790	FEDEX	2222	8549990...	JAIL 7/4 SHIPMENTS	24.29	
		PRISONER MEDICAL SERVICES	64910	SOUTHERN HEALTH PARTNERS	3460	BASE50...	JAIL 7/2 AUG 2024 PRISONER MEDICAL	12,668.99	
		TRAINING REGISTRATION FEES/TRAVEL	66310	SAM HOUSTON STATE UNIVERSITY	7612	PO1807...	JAIL 7/5 CONF REG- PRUITT, BENAVIDES 9/9- 9/13	650.00	
JAIL OPERATIONS	Total 180							14,464.54	0.00
JUSTICE OF PEACE PRECINCT #2	460	OMNIBASE PROGRAM SERVICES	64230	OMNIBASE SERVICES OF TEXAS	5829	2240020...	JP2 7/1 2ND QTR ACTIVITY	84.00	
JUSTICE OF PEACE PRECINCT #2	Total 460							84.00	0.00
JUSTICE OF PEACE-PRECINCT #1	450	OMNIBASE PROGRAM SERVICES	64230	OMNIBASE SERVICES OF TEXAS	5829	2240010...	JP1 7/1 2ND QTR ACTIVITY	288.00	
JUSTICE OF PEACE-PRECINCT #1	Total 450							288.00	0.00
JUSTICE OF PEACE-PRECINCT #3	470	OMNIBASE PROGRAM SERVICES	64230	OMNIBASE SERVICES OF TEXAS	5829	2240030...	JP3 7/1 2ND QTR ACTIVITY	60.00	
JUSTICE OF PEACE-PRECINCT #3	Total 470							60.00	0.00
JUSTICE OF PEACE-PRECINCT #4	480	OMNIBASE PROGRAM SERVICES	64230	OMNIBASE SERVICES OF TEXAS	5829	2240040...	JP4 7/1 2ND QTR ACTIVITY	84.00	
JUSTICE OF PEACE-PRECINCT #4	Total 480							84.00	0.00
JUSTICE OF PEACE-PRECINCT #5	490	COPY MACHINE LEASE	61340	DEWITT POTH & SON LLC	3379	7597990	JP5 6/24 COPIER COUNT 5/24- 6/24	9.81	
		OMNIBASE PROGRAM SERVICES	64230	OMNIBASE SERVICES OF TEXAS	5829	2240050...	JP5 7/1 2ND QTR ACTIVITY	30.00	
		TELEPHONE SERVICES	66192	FRONTIER COMMUNICATIONS	2855	3619832...	JP5 7/1 ACT# 361-983-2351-100102-5 JULY 2024 PHONE	130.07	

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
JUSTICE OF PEACE-PRECINCT #5	Total 490							169.88	0.00
JUVENILE COURT	500	JUVENILE ASSIGNED-ATTORNEY FEES	63070	SMITH JAMES	72500	2024103	CRT@LAW1 7/11 C# 2024-PF-0011-CC	275.00	
			63070	SMITH JAMES	72500	2024104	CRT@LAW1 7/11 C# 2024-JV-0010-CC	275.00	
			63070	SMITH JAMES	72500	2024105	CRT@LAW1 7/11 C# 2024-JV-0009-CC	275.00	
			63070	SMITH JAMES	72500	2024106	CRT@LAW1 7/11 C# 2024-JV-0008-CC	275.00	
		JUVENILE DETENTION SERVICES	63110	NUECES COUNTY	5473	3490140...	JUV CRT 7/9 JUNE 2024 DETENTION FEES (1) JUV	1,125.00	
			63110	VICTORIA REGIONAL JUVENILE	8249	632024	JUV CRT 7/1 JUNE 2024 DETENTION SVCS (2) JUV	9,400.00	
JUVENILE COURT	Total 500							11,625.00	0.00
LIBRARY	140	GENERAL OFFICE SUPPLIES	53020	QUILL LLC	6602	39330148	LIBRARY 6/28 BINDERS, PENS, TAPE, MRKRS, HOLDER	95.39	
		PHOTO COPIES/SUPPLIES	53030	XEROX CORPORATION	9001	0217317...	LIBRARY 7/10 COPIER LEASE 5/1- 5/30	96.65	
		TELEPHONE SERVICES	66192	FRONTIER COMMUNICATIONS	2855	3615524...	LIBRARY 7/13 A# 361-552-4926- 101592-5 PHONE 7/13- 8/12	115.46	
			66192	FRONTIER COMMUNICATIONS	2855	3615527...	LIBRARY 7/13 A# 361-552-7323- 042491-5 PHONE 7/13- 8/12	231.39	
		UTILITIES-MAIN LIBRARY	66610	CITY OF PORT LAVACA	861	1217300...	LIBRARY 7/12 ACT# 12-1730-00 WATER 6/10- 7/10	141.32	
			66610	CITY OF PORT LAVACA	861	1217310...	LIBRARY 7/12 ACT# 12-1731-00 WATER 6/10- 7/10	40.61	
		UTILITIES-SEADRIFT LIBRARY	66622	CENTERPOINT ENERGY	1805	2981129...	SEA LIBRARY 7/16 ACT# 2981129-6 CCF 0 6/13- 7/12	49.40	
		BOOKS & PRINT MATL-LIBRARY	70550	CENTER POINT LARGE PRINT	776	2104664	LIBRARY 7/1 (2) BOOKS	50.34	
LIBRARY	Total 140							820.56	0.00

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
MISCELLANEOUS	280	INSURANCE-LIABILITY AND PROPERTY	62872	WRIGHT NATIONAL FLOOD INS CO	2310	PO2800...	CALCO 7/4 P# 42115005745715 FLD INS POC VFD & JP5 CRT RM	11,781.00	
			62872	WRIGHT NATIONAL FLOOD INS CO	2310	PO2800...	CALCO 7/5 P# 42115005920315 FLD INS JP5 BLDG	717.00	
		TELEPHONE SERVICES	66192	FRONTIER COMMUNICATIONS	2855	3611970...	CH 7/13 ACT# 361-197-0090-041323-5 PHONE 7/13- 8/12	654.90	
			66192	FRONTIER COMMUNICATIONS	2855	3615521...	MODEM 7/16 ACT# 361-552-1476- 082207-5 7/16-8/15	79.94	
			66192	FRONTIER COMMUNICATIONS	2855	3615534...	CH/ANNEX 7/13 ACT# 361-553-4465- 011607-5 PHONE 7/13- 8/12	1,946.26	
			66192	FRONTIER COMMUNICATIONS	2855	3615534...	ANNEX 7/13 ACT# 361-553-4645- 012307-5 PHONE 7/13- 8/12	278.21	
MISCELLANEOUS	Total 280							15,457.31	0.00
MUSEUM	150	UTILITIES-MUSEUM	66612	CENTERPOINT ENERGY	1805	2860820...	MUSEUM 7/16 ACT# 2860820-6 CCF 17 6/13- 7/12	71.24	
			66612	CITY OF PORT LAVACA	861	1208650...	MUSEUM 7/12 ACT# 12-0865-00 WATER 6/10- 7/10	67.63	
MUSEUM	Total 150							138.87	0.00
NO DEPARTMENT	999	PETTY CASH - JURY PAY	10162	RHONDA S. KOKENA	5545	PO0718...	TREAS 7/18 REIMB & INCREASE JURY CASH FUND THRU 7.19.24	3,000.00	
		ACCRUED UNITED WAY	20525	UNITED WAY OF CALHOUN COUNTY	8019	PO0719...	CALCO 7/18 JULY 2024 DONATIONS	10.00	
		ACCRUED MISCELLANEOUS	20533	TMPA	7723	PO0719...	CALCO 7/18 JULY 2024 PREMIUMS	312.87	
		ACCRUED INSURANCE-ADand D-TAC HEBP	20561	TEXAS ASSOCIATION OF COUNTIES	7778	PO0723...	CALCO 7/23 JULY 2024 PREMIUMS	57.66	
		ACCRUED INSURANCE-DENTAL	20563	TEXAS ASSOCIATION OF COUNTIES	7778	PO0723...	CALCO 7/23 JULY 2024 PREMIUMS	7,523.91	

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
		ACCRUED INSURANCE-LT/ST DISABILITY	20566	RELIANCE STANDARD LIFE	6927	PO0723...	CALCO 7/23 JULY 2024 PREMIUMS	1,960.34	
		ACCRUED INSURANCE-MEDICAL	20567	TEXAS ASSOCIATION OF COUNTIES	7778	PO0723...	CALCO 7/23 JULY 2024 PREMIUMS	223,273.39	
		ACCRUED INSURANCE-TERM LIFE-TAC HEBP	20571	TEXAS ASSOCIATION OF COUNTIES	7778	PO0723...	CALCO 7/23 JULY 2024 PREMIUMS	465.28	
		ACCRUED INSURANCE-VOLUNTARY TERM LIFE	20572	RELIANCE STANDARD LIFE	6927	PO0723...	CALCO 7/23 JULY 2024 PREMIUMS	2,845.78	
		ACCRUED INSURANCE-VOLUNTARY ADandD	20573	RELIANCE STANDARD LIFE	6927	PO0723...	CALCO 7/23 JULY 2024 PREMIUMS	300.90	
		ACCRUED INSURANCE-VOLUNTARY VISION	20574	TEXAS ASSOCIATION OF COUNTIES	7778	PO0723...	CALCO 7/23 JULY 2024 PREMIUMS	1,051.33	
NO DEPARTMENT	Total 999							240,801.46	0.00
ROAD AND BRIDGE-PRECINCT #1	540	MACHINERY PARTS/SUPPLIES	53210	POWER HARDWARE LLC	62260	A109357	RB1 6/26 JOINT COMPOUND	1.89	
			53210	TRI-WHOLESALE COMPANY, INC.	7637	9301116...	RB1 7/9 BRAKLEEN SPRAY- U358	13.40	
			53210	TRI-WHOLESALE COMPANY, INC.	7637	9301116...	RB1 7/9 1G FRAM PSF- U358	20.23	
			53210	TRI-WHOLESALE COMPANY, INC.	7637	9301116...	RB1 7/9 TRANS HOSE, CLAMP- U358	13.76	
			53210	TRI-WHOLESALE COMPANY, INC.	7637	9301116...	RB1 7/10 OIL FILTER, O-RING- U294	13.10	
		JANITOR SUPPLIES	53640	GULF COAST PAPER CO INC	2619	30884	RB1 5/6 CREDIT ON RETURN- BUG BLASTER		74.52
		UNIFORMS	53995	CINTAS CORPORATION LOC. 083	958	4198503...	RB1 7/11 UNIFORMS	86.22	
		TELEPHONE SERVICES	66192	FRONTIER COMMUNICATIONS	2855	3615529...	RB1 7/13 ACT# 361-552-9242- 021403-5 PHONE 7/13- 8/12	246.79	
		UTILITIES	66600	CENTERPOINT ENERGY	1805	5118678...	RB1 7/16 ACT# 5118678-1 CCF 2 6/13- 7/12	53.33	

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
		UTILITIES-PARKS	66614	CITY OF PORT LAVACA	861	1421050...	CHOC BAY PK 7/16 ACT# 14-2105-00 WATER 6/15- 7/15	137.50	
			66614	CITY OF PORT LAVACA	861	1421100...	CHOC BAY PK 7/16 ACT# 14-2110-00 WATER 6/15- 7/15	40.61	
ROAD AND BRIDGE-PRECINCT #1	Total 540							626.83	74.52
ROAD AND BRIDGE-PRECINCT #2	550	MACHINERY PARTS/SUPPLIES	53210	ANDERSON MACHINERY CO., INC.	13	P502K1	RB2 7/8 BELT & TENSIONER- SWEEPER	305.30	
		JANITOR SUPPLIES	53640	CINTAS CORPORATION LOC. 083	958	4198186...	RB2 7/9 SCRAPER MAT	3.98	
		UNIFORMS	53995	CINTAS CORPORATION LOC. 083	958	4198186...	RB2 7/9 UNIFORMS	64.86	
		MISCELLANEOUS	63920	UV LOGISTICS LLC	8979	3632485	RB2 7/3 HAUL PIPE TO STORAGE LOT	750.00	
			63920	UV LOGISTICS LLC	8979	3632486	RB2 7/3 HAUL PIPE TO STORAGE LOT	1,275.00	
		OUTSIDE MAINTENANCE	64370	VICTORIA FIRE & SAFETY	8204	145448	RB2 7/2 RECHARGE & INSPECT FIRE EXTINGUISHERS	412.10	
		TELEPHONE SERVICES	66192	FRONTIER COMMUNICATIONS	2855	3615529...	RB2 7/13 ACT# 361-552-9656- 010165-5 PHONE 7/13- 8/12	183.40	
			66192	AT&T MOBILITY	5209	9972862...	RB2 7/4 ACT# 997286221 IPAD WIFI 7/5- 8/4	69.98	
ROAD AND BRIDGE-PRECINCT #2	Total 550							3,064.62	0.00
ROAD AND BRIDGE-PRECINCT #3	560	MACHINERY PARTS/SUPPLIES	53210	LES ZEPLIN MOTORS	4688	18086	RB3 7/10 BELTS FOR MOWER	149.00	
			53210	GULF COAST HARDWARE LLC	63193	190250	RB3 7/9 DRUM FAN, CHAIN, MISC SUPP	312.89	
			53210	TRI-WHOLESALE COMPANY, INC.	7637	9301116...	RB3 7/10 FILTER, V-BELT-U34	27.45	
		GASOLINE/OIL/DIESEL/GRE...	53540	LES ZEPLIN MOTORS	4688	18086	RB3 7/10 OIL	72.00	
		JANITOR SUPPLIES	53640	CINTAS CORPORATION LOC. 083	958	4198353...	RB3 7/10 FRESHENER	6.00	

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
		SUPPLIES-MISCELLANEOUS	53992	GULF COAST HARDWARE LLC	63193	190317	RB3 7/11 CAR WASH, LOCKS- TRASH CAN	91.96	
			53992	GULF COAST HARDWARE LLC	63193	190404	RB3 7/13 RAINX, WIPES	41.15	
		UNIFORMS	53995	CINTAS CORPORATION LOC. 083	958	4198353...	RB3 7/10 UNIFORMS	84.41	
		GARBAGE COLL-OLIVIA	62672	WHITE TRASH SERVICES	1952	223484	RB3 7/19 AUG 2024 TRASH SVC	187.35	
		TELEPHONE SERVICES	66192	AT&T MOBILITY	5209	3617461...	RB3 7/3 ACT# 287275183899 PHONE 7/4- 8/3	174.07	
ROAD AND BRIDGE-PRECINCT #3	Total 560							1,146.28	0.00
ROAD AND BRIDGE-PRECINCT #4	570	MACHINERY PARTS/SUPPLIES	53210	ARNOLD OIL COMPANY - VICTORIA	1472	102KU0...	RB4 7/9 QUICK CONNECTS	15.93	
			53210	INTERSTATE BATTERIES -VICTORIA	3429	1901103...	RB4 7/9 BATTERIES	65.90	
			53210	THIRD COAST DISTRIBUTING, LLC	75930	029418	RB4 7/1 HYD HOSE, FITTINGS	135.83	
			53210	TRI-WHOLESALE COMPANY, INC.	7637	9301115...	RB4 6/27 CHAIN, SPARK PLUG, OIL, PIN	70.83	
			53210	TRI-WHOLESALE COMPANY, INC.	7637	9301116...	RB4 7/9 FILTERS	25.04	
			53210	TRI-WHOLESALE COMPANY, INC.	7637	9301116...	RB4 7/11 GROMMET, LED LIGHT	63.88	
			53210	TRI-WHOLESALE COMPANY, INC.	7637	9301116...	RB4 7/11 FILTERS	70.67	
		ROAD & BRIDGE SUPPLIES	53510	THIRD COAST CONCEPTS INC	7593	3022	RB4 6/18 (8) LOADS SAND	1,400.00	
		INSECTICIDES/PESTICIDES	53630	CLARKE MOSQUITO CONTROL	9861	0051094...	RB4 6/28 (6) CASES FOURSTAR 45-DAY BRIQUET	1,920.00	
		SUPPLIES-MISCELLANEOUS	53992	CINTAS CORPORATION LOC. 083	958	4198048...	RB4 7/9 MISC SUP	9.00	
			53992	CINTAS CORPORATION LOC. 083	958	4198846...	RB4 7/15 MISC SUP	9.00	
		EQUIPMENT RENTAL	62510	ANDERSON MACHINERY CO., INC.	13	R5014M	RB4 7/10 ROLLER RENTAL 7/10- 8/6	3,605.75	

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
		GARBAGE COLL-POC PARKS	62664	WHITE TRASH SERVICES	1952	221885	RB4 7/19 AUG 2024 TRASH SVC	346.68	
		GARBAGE COLL-SEADRIFT	62676	WHITE TRASH SERVICES	1952	221884	RB4 7/19 AUG 2024 TRASH SVC	624.02	
		MISCELLANEOUS	63920	DIAMOND INSPECTIONS #2	1422	17525	RB4 7/9 STATE INSPECTION	7.00	
			63920	DIAMOND INSPECTIONS #2	1422	17527	RB4 7/11 STATE INSPECTION	7.00	
			63920	KERRI BOYD, TAX ASSESSOR	4041	1437557...	RB4 7/11 REGISTRATION	7.50	
			63920	KERRI BOYD, TAX ASSESSOR	4041	1437613...	RB4 7/9 REGISTRATION	7.50	
		OUTSIDE SERVICES	64400	DOUGLAS EVA LEE	3778	JUL24	RB4 7/17 JULY 2024 OFFICE CLEANING	300.00	
		UNIFORMS	66590	CINTAS CORPORATION LOC. 083	958	4198048...	RB4 7/9 UNIFORMS	79.74	
			66590	CINTAS CORPORATION LOC. 083	958	4198846...	RB4 7/15 UNIFORMS	79.74	
		CAPITAL OUTLAY	70750	SIGN WORKS	7272	24508	RB4 7/9 DWN PMNT- SIGN @ BILL SANDERS PK	3,307.50	
ROAD AND BRIDGE-PRECINCT #4	Total 570							12,158.51	0.00
SHERIFF	760	UNIFORMS	53995	FIKES BROOK	2180	7924	SO 7/9 LOGOS, PATCHES	552.00	
		AUTOMOTIVE REPAIRS	60360	KNEUPPER CARROLL	3678	45126	SO 7/11 OIL CHNG- U9	76.89	
			60360	KNEUPPER CARROLL	3678	45195	SO 7/13 OIL CHG- OSG13	103.89	
			60360	AUTO ZONE	6	3512724...	SO 7/13 BUG REMOVER WASH	28.35	
			60360	CARY'S TIRE & AUTOMOTIVE LLC	89820	30638	SO 7/9 CAMSHAFT, WATERPUMP, HEADLAMP, BELT- U40	752.98	
		PHYSICALS	64670	GRANT ROBERT W	2338	64	SO 7/14 (2) EMPLOYEE EVALS	370.00	
		TELEPHONE SERVICES	66192	FRONTIER COMMUNICATIONS	2855	2100064...	SO 7/13 ACT# 210-006-4378-100174-5 PHONE 7/13- 8/12	5.00	
SHERIFF	Total 760							1,889.11	0.00

CALHOUN COUNTY, TEXAS
Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 07.24.24
1000 - GENERAL FUND

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
WASTE MANAGEMENT	380	MACHINERY PARTS/SUPPLIES	53210	POWER HARDWARE LLC	62260	B73980	WASTE MGMT 7/13 HARDWARE	7.84	
WASTE MANAGEMENT	Total 380							7.84	0.00

CALHOUN COUNTY, TEXAS
Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 07.24.24
2610 - AIRPORT FUND

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
NO DEPARTMENT	999	RADIO MAINTENANCE	65180	DBT TRANSPORTATION SERVICES	7032	2554180	AIRPORT 7/10 INST SVC KIT- WIND SENSORS	346.00	
		TELEPHONE SERVICES	66192	FRONTIER COMMUNICATIONS	2855	3615520...	AIRPORT 7/13 ACT# 361-552-0903- 021369-5 PHONE 7/13- 8/12	109.32	
NO DEPARTMENT	Total 999							455.32	0.00

CALHOUN COUNTY, TEXAS

Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 07.24.24

2699 - JUVENILE CASE MANAGER FUND

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
NO DEPARTMENT	999	ACCRUED INSURANCE-ADand D-TAC HEBP	20561	TEXAS ASSOCIATION OF COUNTIES	7778	PO0723...	CALCO 7/23 JULY 2024 PREMIUMS	0.03	
		ACCRUED INSURANCE-DENTAL	20563	TEXAS ASSOCIATION OF COUNTIES	7778	PO0723...	CALCO 7/23 JULY 2024 PREMIUMS	2.10	
		ACCRUED INSURANCE-MEDICAL	20567	TEXAS ASSOCIATION OF COUNTIES	7778	PO0723...	CALCO 7/23 JULY 2024 PREMIUMS	83.26	
		ACCRUED INSURANCE-TERM LIFE-TAC HEBP	20571	TEXAS ASSOCIATION OF COUNTIES	7778	PO0723...	CALCO 7/23 JULY 2024 PREMIUMS	0.20	
		ACCRUED INSURANCE-VOLUNTARY VISION	20574	TEXAS ASSOCIATION OF COUNTIES	7778	PO0723...	CALCO 7/23 JULY 2024 PREMIUMS	0.38	
NO DEPARTMENT	Total 999							85.97	0.00

CALHOUN COUNTY, TEXAS
Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 07.24.24
2716 - GRANTS FUND

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
NO DEPARTMENT	999	ACCRUED MISCELLANEOUS	20533	TMPA	7723	PO0719...	CALCO 7/18 JULY 2024 PREMIUMS	2.83	
		ACCRUED INSURANCE-ADand D-TAC HEBP	20561	TEXAS ASSOCIATION OF COUNTIES	7778	PO0723...	CALCO 7/23 JULY 2024 PREMIUMS	0.20	
		ACCRUED INSURANCE-DENTAL	20563	TEXAS ASSOCIATION OF COUNTIES	7778	PO0723...	CALCO 7/23 JULY 2024 PREMIUMS	32.28	
		ACCRUED INSURANCE-MEDICAL	20567	TEXAS ASSOCIATION OF COUNTIES	7778	PO0723...	CALCO 7/23 JULY 2024 PREMIUMS	755.13	
		ACCRUED INSURANCE-TERM LIFE-TAC HEBP	20571	TEXAS ASSOCIATION OF COUNTIES	7778	PO0723...	CALCO 7/23 JULY 2024 PREMIUMS	1.60	
		ACCRUED INSURANCE-VOLUNTARY TERM LIFE	20572	RELIANCE STANDARD LIFE	6927	PO0723...	CALCO 7/23 JULY 2024 PREMIUMS	0.82	
		ACCRUED INSURANCE-VOLUNTARY VISION	20574	TEXAS ASSOCIATION OF COUNTIES	7778	PO0723...	CALCO 7/23 JULY 2024 PREMIUMS	2.23	
		ENGINEERING SERVICES	62454	G&W ENGINEERS, INC.	2601	5310023...	FORMOSA ENVRION TRUST 7/2 RECYCLE WASTE TRANSF 4/29- 6/30	750.00	
		PROGRAMS: SUMMER/AUTHOR VISITS	64970	CREATIVE PRODUCT SOURCE INC	223	CPI1037...	LIBRARY 7/9 (500) GLOW IN THE DARK BRACELETS	1,195.31	
			64970	FUN EXPRESS LLC	25151	7318825...	LIBRARY 7/10 MISC SUPP FOR CHILDREN'S PROGRAM	50.36	
NO DEPARTMENT	Total 999							2,790.76	0.00

CALHOUN COUNTY, TEXAS
Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 07.24.24
2731 - LAW LIBRARY FUND

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
NO DEPARTMENT	999	BOOKS-LAW	70500	THOMSON REUTERS - WEST	8612	8503966...	LAW LIBRARY 7/1 JUNE 2024 WEST SUBS CHGS	1,330.29	
NO DEPARTMENT	Total 999							1,330.29	0.00

CALHOUN COUNTY, TEXAS

Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 07.24.24

2736 - POC COMMUNITY CENTER

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
NO DEPARTMENT	999	ACCRUED INSURANCE-ADand D-TAC HEBP	20561	TEXAS ASSOCIATION OF COUNTIES	7778	PO0723...	CALCO 7/23 JULY 2024 PREMIUMS	0.01	
		ACCRUED INSURANCE-DENTAL	20563	TEXAS ASSOCIATION OF COUNTIES	7778	PO0723...	CALCO 7/23 JULY 2024 PREMIUMS	0.77	
		ACCRUED INSURANCE-LT/ST DISABILITY	20566	RELIANCE STANDARD LIFE	6927	PO0723...	CALCO 7/23 JULY 2024 PREMIUMS	1.24	
		ACCRUED INSURANCE-MEDICAL	20567	TEXAS ASSOCIATION OF COUNTIES	7778	PO0723...	CALCO 7/23 JULY 2024 PREMIUMS	30.72	
		ACCRUED INSURANCE-TERM LIFE-TAC HEBP	20571	TEXAS ASSOCIATION OF COUNTIES	7778	PO0723...	CALCO 7/23 JULY 2024 PREMIUMS	0.07	
		RENTAL DEPOSITS	20820	CULA ROJA TOURNAMENT	2317	0991	POC CC 9/18 DEPOSIT REFUND	350.00	
		MISCELLANEOUS	63920	GULF COAST PAPER CO INC	2619	2550845	POC CC 7/9 TRASH BAGS, TISSUE	267.72	
		UTILITIES-POC COMMUNITY CENTER	66616	WHITE TRASH SERVICES	1952	222291	POC CC 7/19 AUG 2024 TRASH SVC	346.68	
			66616	WHITE TRASH SERVICES	1952	222708	POC PAVILION 7/19 AUG 2024 TRASH SVC	262.30	
			66616	FRONTIER COMMUNICATIONS	2855	3619834...	POC CC 7/13 ACT# 361-983-4485- 102899-5 PHONE 7/13- 8/12	50.37	
			66616	INFINIUM BROADBAND INTERNET	3378	81399	POC CC 7/17 ACT# ACC0004004 INTERNET 7/17- 8/17	150.00	
NO DEPARTMENT	Total 999							1,459.88	0.00

CALHOUN COUNTY, TEXAS
Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 07.24.24
5111 - CAP.PROJ.-CDBG-DR INFRASTRUCTURE

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
NO DEPARTMENT	999	ENGINEERING SERVICES	62454	G&W ENGINEERS, INC.	2601	5310011...	CAP PROJ 7/9 CDBG-DR INFRAST- LANE RD 10/30/23- 6/30/24	2,397.15	
			62454	G&W ENGINEERS, INC.	2601	5310011...	CAP PROJ 6/13 CHOC BAY PK 4/3- 6/2	3,900.00	
NO DEPARTMENT	Total 999							6,297.15	0.00

CALHOUN COUNTY, TEXAS

Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 07.24.24

5149 - CPRJ-OLIVIA HATERIUS PARK IMPROVEMENTS

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
NO DEPARTMENT	999	SUPPLIES	53974	METAL MART 28	5028	0228020...	CMP OHP IMPR 7/10 SUPP FOR PORTA POTTY ENCLOSURE	381.93	
			53974	COASTAL NAIL & TOOL LLC	9070	2407156...	CMP OHP IMPR 7/10 SUPP-PORTA POTTY ENCLOSURE	147.23	
			53974	COASTAL NAIL & TOOL LLC	9070	2407156...	CMP OHP IMPR 7/11 SUPP FOR PORTA POTTY ENCLOSURE	172.21	
NO DEPARTMENT	Total 999							701.37	0.00

CALHOUN COUNTY, TEXAS
Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 07.24.24
7750 - MISCELLANEOUS CLEARING FUND

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
NO DEPARTMENT	999	DUE TO OTHERS	20751	MCCREARY VESELKA BRAGG	5088	PODTA2...	TAX A/C 7/9 JUNE 2024 DTA FEES	59.00	
NO DEPARTMENT	Total 999							59.00	0.00

CALHOUN COUNTY, TEXAS
Posted General Ledger Transactions - APPROVAL LIST - COMM CRT - 07.24.24
9200 - JUVENILE PROBATION FUND

Dept Title	Dept C...	GL Title	GL Code	Vendor Name	Ven... ID	Document Number	Transaction Description	Debit	Credit
NO DEPARTMENT	999	ACCRUED MISCELLANEOUS	20533	TMPA	7723	PO0719...	CALCO 7/18 JULY 2024 PREMIUMS	29.54	
		ACCRUED INSURANCE-ADand D-TAC HEBP	20561	TEXAS ASSOCIATION OF COUNTIES	7778	PO0723...	CALCO 7/23 JULY 2024 PREMIUMS	1.20	
		ACCRUED INSURANCE-DENTAL	20563	TEXAS ASSOCIATION OF COUNTIES	7778	PO0723...	CALCO 7/23 JULY 2024 PREMIUMS	125.50	
		ACCRUED INSURANCE-MEDICAL	20567	TEXAS ASSOCIATION OF COUNTIES	7778	PO0723...	CALCO 7/23 JULY 2024 PREMIUMS	4,358.03	
		ACCRUED INSURANCE-TERM LIFE-TAC HEBP	20571	TEXAS ASSOCIATION OF COUNTIES	7778	PO0723...	CALCO 7/23 JULY 2024 PREMIUMS	9.68	
		ACCRUED INSURANCE-VOLUNTARY TERM LIFE	20572	RELIANCE STANDARD LIFE	6927	PO0723...	CALCO 7/23 JULY 2024 PREMIUMS	69.00	
		ACCRUED INSURANCE-VOLUNTARY VISION	20574	TEXAS ASSOCIATION OF COUNTIES	7778	PO0723...	CALCO 7/23 JULY 2024 PREMIUMS	4.58	
		ELECTRONIC MONITORING	62380	SATELLITE TRACKING OF	6374	STPINV...	JUV PROB 6/30 JUNE 2024 ELECTRONIC MONITORING	72.00	
			62380	SATELLITE TRACKING OF	6374	STPINV...	JUV PROB 6/30 (2) UNRECOVERABLE MONITORS	500.00	
		MEDICAL/DENTAL FEES	63776	NUECES COUNTY	5473	3492014...	JUV PROB 7/5 JUNE 2024 MEDICAL (1) JUV	27.91	
			63776	VICTORIA REGIONAL JUVENILE	8249	632024	JUV PROB 7/1 JUNE 2024 MEDICAL (1) JUV	108.15	
		RESIDENT SERV & DETENT-PRE&POST ADJUDICA	65543	NUECES COUNTY	5473	3492014...	JUV PROB 7/9 JUNE 2024 RESIDENTIAL PLACEMENT (1) JUV	6,000.00	
NO DEPARTMENT	Total 999							11,305.59	0.00
Report Total								360,048.19	318.12

MEMORIAL MEDICAL CENTER
COMMISSIONERS COURT APPROVAL LIST FOR ---July 24, 2024

PAYABLES AND PAYROLL			
7/18/2024 Weekly Payables	153,057.42		
7/18/2024 Patient Refund	820.84		
7/22/2024 McKesson-340B Prescription Expense	34,373.02		
7/22/2024 Amerisource Bergen-340B Prescription Expense	359.66		
7/22/2024 Citibank Credit Card	2,439.96		
7/22/2024 Payroll Liabilities-Payroll Taxes	315.56		
7/22/2024 Payroll	1,073.13		
Prosperity Electronic Bank Payments			
7/22/2024 90 Degree Benefits - employee insurance claims	41,014.09		
7/22/2024 Pay Plus-Patient Claims Processing Fee	684.07		
7/22/2024 Credit Card Lease Fee	285.82		
TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS		$	234,423.57
TRANSFER BETWEEN FUNDS FROM MMC TO NURSING HOMES			
7/18/2024 MMC Operating to Broadmoor-Correction of insurance payment deposited into MMC Operating in error	605.34		
7/18/2024 MMC Operating to The Crescent-Correction of insurance payment deposited into MMC Operating in error	14,217.51		
7/18/2024 MMC Operating to Golden Creek Healthcare-Correction of insurance payment deposited into MMC Operating in error	53,135.27		
7/18/2024 MMC Operating to Tuscany Village-Correction of insurance payment deposited into MMC operating in error	3,300.00		
7/18/2024 MMC Operating to Bethany-Correction insurance payment deposited into MMC Operating in error	115,243.85		
TOTAL TRANSFERS BETWEEN FUNDS		$	186,501.97
NURSING HOME UPL EXPENSES			
7/22/2024 Nursing Home UPL-Cantex Transfer	647,317.10		
7/22/2024 Nursing Home UPL-Nexion Transfer	48,177.21		
7/22/2024 Nursing Home UPL-Tuscany Transfer	56,026.02		
7/22/2024 Nursing Home UPL-HSL Transfer	29,034.96		
QIPP CHECKS TO MMC			
7/22/2024 Ashford - Wellpoint May QIPP hospital portion	4,116.39		
7/22/2024 Broadmoor -Wellpoint May QIPP hospital portion	1,466.56		
7/22/2024 Crescent - Wellpoint May QIPP hospital portion	1,097.42		
7/22/2024 Fort Bend - Wellpoint May QIPP hospital portion	1,252.16		
7/22/2024 Solera - Wellpoint May QIPP hospital portion	1,155.83		
7/22/2024 Golden Creek - Superior May QIPP hospital portion	3,329.22		
7/22/2024 Bethany-Superior May QIPP hospital portion	3,593.90		
7/22/2024 Tuscany - Wellpoint May QIPP hospital portion	1,681.05		
TOTAL NURSING HOME UPL EXPENSES		$	798,247.82
TOTAL INTER-GOVERNMENT TRANSFERS		$	-
GRAND TOTAL DISBURSEMENTS APPROVED July 24, 2024		$	1,219,173.36

Vendor#	Vendor Name					Class	Pay Code				
A1680	AIRGAS USA, LLC - CENTRAL DIV					M					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	9151506445		07/10/202	07/07/202	08/04/202			266.68	0.00	0.00	266.68
		OXYGEN									
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
		A1680	AIRGAS USA, LLC - CENTRAL DIV					266.68	0.00	0.00	266.68
Vendor#	Vendor Name					Class	Pay Code				
14028	AMAZON CAPITAL SERVICES										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	1YNJFGVH1RRV		07/17/202	07/10/202	08/09/202			15.63	0.00	0.00	15.63
		SUPPLIES									
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
		14028	AMAZON CAPITAL SERVICES					15.63	0.00	0.00	15.63
Vendor#	Vendor Name					Class	Pay Code				
13244	ASD HEALTHCARE										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	3169183986A		06/30/202	03/25/202	06/23/202			1,138.70	0.00	0.00	1,138.70
	804774582		07/01/202	07/05/202	08/04/202			6.16	0.00	0.00	6.16
		INTEREST CHARGES									
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
		13244	ASD HEALTHCARE					1,144.86	0.00	0.00	1,144.86
Vendor#	Vendor Name					Class	Pay Code				
B1220	BECKMAN COULTER INC					M					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	5490913		07/01/202	07/01/202	07/26/202			5,016.58	0.00	0.00	5,016.58
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
		B1220	BECKMAN COULTER INC					5,016.58	0.00	0.00	5,016.58
Vendor#	Vendor Name					Class	Pay Code				
15540	[redacted]										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	TILBIL0002		07/18/202	07/05/202	07/05/202			240.00	0.00	0.00	240.00
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
		15540	[redacted]					240.00	0.00	0.00	240.00
Vendor#	Vendor Name					Class	Pay Code				
13892	BLUE CROSS BLUE SHIELD REFUND										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	PENJOI0001		07/18/202	06/12/202	07/01/202			345.91	0.00	0.00	345.91
		PATIENT REFUND									
	PENJOI0001A		07/18/202	06/12/202	07/01/202			71.52	0.00	0.00	71.52
		PATIENT REFUND									
	ACOKEN0002		07/18/202	06/12/202	07/01/202			75.50	0.00	0.00	75.50
		PATIENT REFUN									
	DOMDIN0001		07/18/202	06/12/202	07/01/202			91.52	0.00	0.00	91.52
		PATIENT REFUND									
	LLARUD0001		07/18/202	06/12/202	07/01/202			86.52	0.00	0.00	86.52
		PATIENT REFUND									
	LLARUD0001A		07/18/202	06/12/202	07/01/202			86.52	0.00	0.00	86.52
		PATIENT REFUND									

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	13892	BLUE CROSS BLUE SHIELD REFUND	757.49	0.00	0.00	757.49

Vendor# Vendor Name Class Pay Code

14120 CALHOUN COUNTY EMS

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
202406		06/30/202	07/01/202	07/20/202			3,520.00	0.00	0.00	3,520.00
	JUNE TRANSFERS									

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	14120	CALHOUN COUNTY EMS	3,520.00	0.00	0.00	3,520.00

Vendor# Vendor Name Class Pay Code

C1992 CDW GOVERNMENT, INC. M

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
SC46345		06/30/202	06/29/202	07/29/202			0.02	0.00	0.00	0.02

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	C1992	CDW GOVERNMENT, INC.	0.02	0.00	0.00	0.02

Vendor# Vendor Name Class Pay Code

10212 CLINICAL PATHOLOGY LABS

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
176562024060		06/30/202	06/30/202	08/01/202			21,217.42	0.00	0.00	21,217.42

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	10212	CLINICAL PATHOLOGY LABS	21,217.42	0.00	0.00	21,217.42

Vendor# Vendor Name Class Pay Code

13336 COCA COLA SOUTHWEST BEVERAGES

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
42145764006		07/15/202	07/05/202	08/04/202			548.28	0.00	0.00	548.28
	BEVERAGES									

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	13336	COCA COLA SOUTHWEST BEVERAGES	548.28	0.00	0.00	548.28

Vendor# Vendor Name Class Pay Code

14608 COTIVITI

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
STIDES0001		07/18/202	07/03/202	07/03/202			75.89	0.00	0.00	75.89

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	14608	COTIVITI	75.89	0.00	0.00	75.89

Vendor# Vendor Name Class Pay Code

10368 DEWITT POTH & SON

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
760829		07/17/202	07/09/202	08/03/202			190.10	0.00	0.00	190.10
	SUPPLIES									

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	10368	DEWITT POTH & SON	190.10	0.00	0.00	190.10

Vendor# Vendor Name Class Pay Code

10175 DSHS CENTRAL LAB MC2004

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
CN0426062024		07/01/202	07/01/202	07/26/202			343.15	0.00	0.00	343.15
	LAB SERV									

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	10175	DSHS CENTRAL LAB MC2004	343.15	0.00	0.00	343.15

Vendor# Vendor Name Class Pay Code

15240 ECLINICAL WORKS LLC

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
0002987441A		06/30/202	07/01/202	07/31/202			484.10	0.00	0.00	484.10
	MESSENGER SERVICE MAY 2024									

	Vendor Totals:	Number	Name						Gross	Discount	No-Pay	Net
		15240	ECLINICAL WORKS LLC						484.10	0.00	0.00	484.10
Vendor#	Vendor Name				Class	Pay Code						
15532	[redacted]											
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay		Gross	Discount	No-Pay	Net
	PALELI0002		07/18/202	07/12/202	07/12/202				155.00	0.00	0.00	155.00
		REFUND										
	Vendor Totals:	Number	Name						Gross	Discount	No-Pay	Net
		15532	[redacted]						155.00	0.00	0.00	155.00
Vendor#	Vendor Name				Class	Pay Code						
14708	EQUALIZE RCM SERVICES											
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay		Gross	Discount	No-Pay	Net
	536589		07/10/202	07/01/202	08/03/202				7,642.08	0.00	0.00	7,642.08
		JULY FEES										
	Vendor Totals:	Number	Name						Gross	Discount	No-Pay	Net
		14708	EQUALIZE RCM SERVICES						7,642.08	0.00	0.00	7,642.08
Vendor#	Vendor Name				Class	Pay Code						
11944	EQUIFAX WORKFORCE SOLUTIONS											
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay		Gross	Discount	No-Pay	Net
	2061090796		07/01/202	07/08/202	08/07/202				21.98	0.00	0.00	21.98
		EMPLOYEE VERIF										
	Vendor Totals:	Number	Name						Gross	Discount	No-Pay	Net
		11944	EQUIFAX WORKFORCE SOLUTIONS						21.98	0.00	0.00	21.98
Vendor#	Vendor Name				Class	Pay Code						
T0383	ERIN CLEVENGER				W							
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay		Gross	Discount	No-Pay	Net
	071124		07/18/202	07/11/202	07/11/202				281.84	0.00	0.00	281.84
		TRAVEL EXPENSES										
	Vendor Totals:	Number	Name						Gross	Discount	No-Pay	Net
		T0383	ERIN CLEVENGER						281.84	0.00	0.00	281.84
Vendor#	Vendor Name				Class	Pay Code						
S0501	EVOQUA WATER TECHNOLOGIES LLC											
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay		Gross	Discount	No-Pay	Net
	906539890		07/15/202	07/01/202	07/26/202				2,956.19	0.00	0.00	2,956.19
	906539889		07/15/202	07/01/202	07/26/202				3,087.96	0.00	0.00	3,087.96
	906547198		07/15/202	07/03/202	07/28/202				247.50	0.00	0.00	247.50
	906547199		07/15/202	07/03/202	07/30/202				746.68	0.00	0.00	746.68
	Vendor Totals:	Number	Name						Gross	Discount	No-Pay	Net
		S0501	EVOQUA WATER TECHNOLOGIES LLC						7,038.33	0.00	0.00	7,038.33
Vendor#	Vendor Name				Class	Pay Code						
10689	FASTHEALTH CORPORATION											
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay		Gross	Discount	No-Pay	Net
	07B24MMC		07/15/202	07/08/202	07/23/202				125.00	0.00	0.00	125.00
		SECURITY CERTIFICATE RENEW										
	Vendor Totals:	Number	Name						Gross	Discount	No-Pay	Net
		10689	FASTHEALTH CORPORATION						125.00	0.00	0.00	125.00
Vendor#	Vendor Name				Class	Pay Code						
13568	FEDEX FREIGHT											
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay		Gross	Discount	No-Pay	Net
	852220661		07/18/202	06/06/202	06/30/202				130.36	0.00	0.00	130.36
		FREIGHT										
	Vendor Totals:	Number	Name						Gross	Discount	No-Pay	Net

	13568	FEDEX FREIGHT						130.36	0.00	0.00	130.36
Vendor#	Vendor Name				Class	Pay Code					
10003	FILTER TECHNOLOGY CO, INC										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	122142		07/12/202	07/05/202	08/02/202			3,264.62	0.00	0.00	3,264.62
	122278		07/12/202	07/05/202	08/04/202			2,004.02	0.00	0.00	2,004.02
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
		10003	FILTER TECHNOLOGY CO, INC					5,268.64	0.00	0.00	5,268.64
Vendor#	Vendor Name				Class	Pay Code					
F1400	FISHER HEALTHCARE				M						
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	3468926		06/28/202	06/28/202	07/28/202			60.59	0.00	0.00	60.59
	3357981		06/30/202	06/25/202	07/25/202			2,923.00	0.00	0.00	2,923.00
	2468925 3		06/30/202	06/28/202	07/28/202			23.30	0.00	0.00	23.30
	3532444		07/01/202	07/02/202	08/01/202			761.13	0.00	0.00	761.13
	3532443		07/18/202	07/02/202	07/27/202			670.08	0.00	0.00	670.08
		SUPPLIES									
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
		F1400	FISHER HEALTHCARE					4,438.10	0.00	0.00	4,438.10
Vendor#	Vendor Name				Class	Pay Code					
11183	FRONTIER										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	070224		07/15/202	07/02/202	07/26/202			2,626.39	0.00	0.00	2,626.39
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
		11183	FRONTIER					2,626.39	0.00	0.00	2,626.39
Vendor#	Vendor Name				Class	Pay Code					
11149	GBS ADMINISTRATORS, INC										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	152967207693		06/30/202	05/20/202	08/09/202			5,230.31	0.00	0.00	5,230.31
		LTD									
	860002436341		07/01/202	06/20/202	08/09/202			5,230.31	0.00	0.00	5,230.31
		LTD									
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
		11149	GBS ADMINISTRATORS, INC					10,460.62	0.00	0.00	10,460.62
Vendor#	Vendor Name				Class	Pay Code					
12404	GE PRECISION HEALTHCARE, LLC										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	6002703764		07/15/202	06/25/202	07/25/202			216.10	0.00	0.00	216.10
		JULY SERVICE DATE									
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
		12404	GE PRECISION HEALTHCARE, LLC					216.10	0.00	0.00	216.10
Vendor#	Vendor Name				Class	Pay Code					
15536	[redacted]										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	SALGLO0001		07/18/202	07/05/202	07/05/202			295.42	0.00	0.00	295.42
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
		15536	[redacted]					295.42	0.00	0.00	295.42
Vendor#	Vendor Name				Class	Pay Code					

Vendor#	Vendor Name					Class	Pay Code				
12948	GREAT AMERICA FINANCIAL SVCS										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	36916571		06/30/202	07/02/202	07/31/202			10,430.19	0.00	0.00	10,430.19
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
		12948	GREAT AMERICA FINANCIAL SVCS					10,430.19	0.00	0.00	10,430.19
Vendor#	Vendor Name					Class	Pay Code				
G1210	GULF COAST PAPER COMPANY					M					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	2550839		07/17/202	07/09/202	08/08/202			899.89	0.00	0.00	899.89
		SUPPLIES									
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
		G1210	GULF COAST PAPER COMPANY					899.89	0.00	0.00	899.89
Vendor#	Vendor Name					Class	Pay Code				
10804	HEALTHCARE CODING & CONSULTING										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	15231		06/30/202	06/30/202	07/30/202			355.00	0.00	0.00	355.00
			June 2024								
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
		10804	HEALTHCARE CODING & CONSULTING					355.00	0.00	0.00	355.00
Vendor#	Vendor Name					Class	Pay Code				
12868	HOLT CAT										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	EZ25554		06/30/202	07/10/202	07/25/202			559.50	0.00	0.00	559.50
	EZ25553		06/30/202	07/10/202	07/25/202			559.50	0.00	0.00	559.50
		QUARTERLY INSPECT									
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
		12868	HOLT CAT					1,119.00	0.00	0.00	1,119.00
Vendor#	Vendor Name					Class	Pay Code				
10530	HUMANA										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	PARARI0001		07/18/202	06/21/202	07/03/202			117.60	0.00	0.00	117.60
	GARLIN0001		07/18/202	07/03/202	07/03/202			117.60	0.00	0.00	117.60
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
		10530	HUMANA					235.20	0.00	0.00	235.20
Vendor#	Vendor Name					Class	Pay Code				
12656	KNOWBE4, INC										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	INV328182		07/15/202	05/31/202	06/30/202			6,210.00	0.00	0.00	6,210.00
		DIAMOND TRAINING 062124-0620									
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
		12656	KNOWBE4, INC					6,210.00	0.00	0.00	6,210.00
Vendor#	Vendor Name					Class	Pay Code				
L0700	LABCORP OF AMERICA HOLDINGS					M					
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	80437017		07/01/202	07/01/202	07/26/202			26.29	0.00	0.00	26.29
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
		L0700	LABCORP OF AMERICA HOLDINGS					26.29	0.00	0.00	26.29
Vendor#	Vendor Name					Class	Pay Code				
11600	LEGAL SHIELD										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	071524		07/17/202	07/15/202	07/30/202			558.55	0.00	0.00	558.55

INSURANCE

Vendor Totals: Number Name

Number	Name	Gross	Discount	No-Pay	Net
11600	LEGAL SHIELD	558.55	0.00	0.00	558.55

Vendor# Vendor Name Class Pay Code

L1640 LOWE'S BUSINESS ACCT/SYNCB W

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
070224		06/30/202	07/02/202	07/28/202			471.08	0.00	0.00	471.08
	SUPPLIES									

Vendor Totals:

Number	Name	Gross	Discount	No-Pay	Net
L1640	LOWE'S BUSINESS ACCT/SYNCB	471.08	0.00	0.00	471.08

Vendor# Vendor Name Class Pay Code

10972 M G TRUST

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
071124		07/11/202	06/30/202				895.00	0.00	0.00	895.00
	INUSRANCE									

Vendor Totals:

Number	Name	Gross	Discount	No-Pay	Net
10972	M G TRUST	895.00	0.00	0.00	895.00

Vendor# Vendor Name Class Pay Code

15200 MANAGED CARE PARTNERS INC.

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
6465		07/16/202	08/01/202	08/01/202			500.00	0.00	0.00	500.00
	AUG 2024 PR FEES									

Vendor Totals:

Number	Name	Gross	Discount	No-Pay	Net
15200	MANAGED CARE PARTNERS INC.	500.00	0.00	0.00	500.00

Vendor# Vendor Name Class Pay Code

11612 MEDICAL AIR SERVICES ASSOC.

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
1855332		07/15/202	06/25/202	07/25/202			1,814.00	0.00	0.00	1,814.00
	JULY SERVICES									

Vendor Totals:

Number	Name	Gross	Discount	No-Pay	Net
11612	MEDICAL AIR SERVICES ASSOC.	1,814.00	0.00	0.00	1,814.00

Vendor# Vendor Name Class Pay Code

10613 MEDIMPACT HEALTHCARE SYS, INC. A/P

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
070924		07/16/202	07/09/202	07/09/202			9.97	0.00	0.00	9.97

Vendor Totals:

Number	Name	Gross	Discount	No-Pay	Net
10613	MEDIMPACT HEALTHCARE SYS, INC.	9.97	0.00	0.00	9.97

Vendor# Vendor Name Class Pay Code

M2470 MEDLINE INDUSTRIES INC M

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
2326281980		07/01/202	07/11/202	08/05/202			61.77	0.00	0.00	61.77
2326281975		07/01/202	07/11/202	08/05/202			671.60	0.00	0.00	671.60
	SUPPLIES									
2326281978		07/01/202	07/11/202	08/05/202			4,018.17	0.00	0.00	4,018.17
2325971277		07/11/202	07/10/202	08/04/202			26.25	0.00	0.00	26.25
	SUPPLIES									
2325971278		07/11/202	07/10/202	08/04/202			557.21	0.00	0.00	557.21
	SUPPLIES									
2325971275		07/11/202	07/10/202	08/04/202			5.62	0.00	0.00	5.62
	SUPPLIES									
2325971274		07/11/202	07/10/202	08/04/202			1,832.41	0.00	0.00	1,832.41
	SUPPLIES									
2325613976		07/11/202	07/10/202	08/04/202			12.43	0.00	0.00	12.43

		SUPPLIES									
	2325971276		07/11/202	07/10/202	08/04/202			5.62	0.00	0.00	5.62
		SUPPLIES									
	2326281979		07/17/202	07/11/202	08/05/202			5,283.52	0.00	0.00	5,283.52
	CM2326506144A		07/18/202	06/25/202	07/20/202			-161.40	0.00	0.00	-161.40
	2326506145A		07/18/202	06/25/202	07/20/202			-78.92	0.00	0.00	-78.92
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
		M2470	MEDLINE INDUSTRIES INC					12,234.28	0.00	0.00	12,234.28
Vendor#	Vendor Name				Class	Pay Code					
10963	MEMORIAL MEDICAL CLINIC										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	071124		07/11/202	07/11/202	07/11/202			175.00	0.00	0.00	175.00
		PAYROLL DED									
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
		10963	MEMORIAL MEDICAL CLINIC					175.00	0.00	0.00	175.00
Vendor#	Vendor Name				Class	Pay Code					
G0333	MICHAEL GAINES				W						
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	070224		07/18/202	07/06/202	07/06/202			1,500.00	0.00	0.00	1,500.00
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
		G0333	MICHAEL GAINES					1,500.00	0.00	0.00	1,500.00
Vendor#	Vendor Name				Class	Pay Code					
10536	MORRIS & DICKSON CO, LLC										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	2203166		07/15/202	07/11/202	07/21/202			2.20	0.00	0.00	2.20
	2200339		07/15/202	07/11/202	07/21/202			2,365.02	0.00	0.00	2,365.02
		SUPPLIES									
	2201811		07/15/202	07/11/202	07/21/202			340.36	0.00	0.00	340.36
		SUPPLIES									
	2200952		07/15/202	07/11/202	07/21/202			27.88	0.00	0.00	27.88
		SUPPLIES									
	CM37602		07/15/202	07/11/202	07/21/202			-359.20	0.00	0.00	-359.20
	2203167		07/15/202	07/11/202	07/25/202			466.60	0.00	0.00	466.60
	2195744		07/16/202	07/10/202	07/20/202			54.50	0.00	0.00	54.50
		SUPPLIES									
	2198224		07/16/202	07/10/202	07/20/202			479.49	0.00	0.00	479.49
	2212391		07/16/202	07/14/202	07/24/202			17.18	0.00	0.00	17.18
		SUPPLIES									
	2210680		07/16/202	07/14/202	07/24/202			398.92	0.00	0.00	398.92
		SUPPLIES									
	2210679		07/16/202	07/14/202	07/25/202			12.65	0.00	0.00	12.65
		SUPPLIES									
	2212392		07/16/202	07/15/202	07/25/202			3,394.70	0.00	0.00	3,394.70
		SUPPLIES									
	2214649		07/16/202	07/15/202	07/25/202			410.17	0.00	0.00	410.17
		SUPPLIES									
	2212395		07/16/202	07/15/202	07/25/202			108.71	0.00	0.00	108.71
		SUPPLIES									

	2212387		07/16/202	07/15/202	07/25/202			617.37	0.00	0.00	617.37
		SUPPLIES									
	2212388		07/16/202	07/15/202	07/25/202			769.72	0.00	0.00	769.72
		SUPPLIES									
	2214650		07/16/202	07/15/202	07/25/202			11.36	0.00	0.00	11.36
		SUPPLIES									
	2212396		07/16/202	07/15/202	07/25/202			6.23	0.00	0.00	6.23
		SUPPLIES									
	2212394		07/16/202	07/15/202	07/25/202			68.90	0.00	0.00	68.90
		SUPPLIES									
	2212389		07/16/202	07/15/202	07/25/202			23.33	0.00	0.00	23.33
		SUPPLIES									
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
		10536	MORRIS & DICKSON CO, LLC					9,216.09	0.00	0.00	9,216.09
Vendor#	Vendor Name					Class	Pay Code				
13548	NACOGDOCHES TRANSCRIPTION										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	8432		06/30/202	07/10/202	07/20/202			67.48	0.00	0.00	67.48
		6/22/24-7/5/24 SERVICES									
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
		13548	NACOGDOCHES TRANSCRIPTION					67.48	0.00	0.00	67.48
Vendor#	Vendor Name					Class	Pay Code				
15528	[redacted]										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	SALNIC0002		07/18/202	06/24/202	07/01/202			114.43	0.00	0.00	114.43
		PATIENT REFUND									
	SALNIC0002A		07/18/202	06/24/202	07/01/202			75.01	0.00	0.00	75.01
		PATIENT REFUND									
	SALNIC0002B		07/18/202	06/24/202	07/01/202			75.01	0.00	0.00	75.01
		PATIENT REFUND									
	SALNICO0002		07/18/202	06/24/202	07/24/202			108.77	0.00	0.00	108.77
		PATIENT REFUN									
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
		15528	[redacted]					373.22	0.00	0.00	373.22
Vendor#	Vendor Name					Class	Pay Code				
11472	OCCUPRO LLC										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	36218		07/10/202	07/07/202	08/06/202			486.68	0.00	0.00	486.68
		MONTHLY LISCENSE- JULY									
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
		11472	OCCUPRO LLC					486.68	0.00	0.00	486.68
Vendor#	Vendor Name					Class	Pay Code				
11155	PARAREV										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	917484		07/15/202	07/01/202	07/31/202			3,084.00	0.00	0.00	3,084.00
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
		11155	PARAREV					3,084.00	0.00	0.00	3,084.00
Vendor#	Vendor Name					Class	Pay Code				
10372	PRECISION DYNAMICS CORP (PDC)										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	9356558363		06/30/202	06/25/202	07/25/202			340.60	0.00	0.00	340.60
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
		10372	PRECISION DYNAMICS CORP (PDC)					340.60	0.00	0.00	340.60
Vendor#	Vendor Name					Class	Pay Code				

12480 PRO ENERGY PARTNERS LLC

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
24060600		06/30/202	07/11/202	07/26/202			1,939.31	0.00	0.00	1,939.31
	NATURAL GAS									

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	12480	PRO ENERGY PARTNERS LLC	1,939.31	0.00	0.00	1,939.31

Vendor#	Vendor Name	Class	Pay Code
11024	REED, CLAYMON, MEEKER & HARGET		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
31684		07/15/202	07/10/202				490.00	0.00	0.00	490.00
	LEGAL SERVICES									

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	11024	REED, CLAYMON, MEEKER & HARGET	490.00	0.00	0.00	490.00

Vendor#	Vendor Name	Class	Pay Code
C1010	SPARKLIGHT	W	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
070624		07/18/202	07/06/202	07/07/202			134.82	0.00	0.00	134.82

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	C1010	SPARKLIGHT	134.82	0.00	0.00	134.82

Vendor#	Vendor Name	Class	Pay Code
S2694	STANFORD VACUUM SERVICE	M	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
255754		07/15/202	07/10/202	07/10/202			550.00	0.00	0.00	550.00
	GREASE TRAP									

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	S2694	STANFORD VACUUM SERVICE	550.00	0.00	0.00	550.00

Vendor#	Vendor Name	Class	Pay Code
15544	[redacted]		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
MARSTE0001A		07/18/202	06/25/202	07/03/202			220.00	0.00	0.00	220.00

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	15544	[redacted]	220.00	0.00	0.00	220.00

Vendor#	Vendor Name	Class	Pay Code
S3960	STERICYCLE, INC		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
8007500115		07/15/202	06/18/202	07/18/202			3,077.93	0.00	0.00	3,077.93
	WASTE DISPOSAL									

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	S3960	STERICYCLE, INC	3,077.93	0.00	0.00	3,077.93

Vendor#	Vendor Name	Class	Pay Code
S3940	STERIS CORPORATION	M	

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
2821312		07/17/202	07/03/202	08/02/202			337.00	0.00	0.00	337.00
12577587		07/17/202	07/10/202	08/09/202			253.36	0.00	0.00	253.36
	SUPPLIES									

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	S3940	STERIS CORPORATION	590.36	0.00	0.00	590.36

Vendor#	Vendor Name	Class	Pay Code
14856	TEXAS A&M HEALTH SCIENCE CENTE		

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
H183212		07/16/202	07/12/202				2,625.00	0.00	0.00	2,625.00

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net

		14856	TEXAS A&M HEALTH SCIENCE CENTE					2,625.00	0.00	0.00	2,625.00
Vendor#	Vendor Name				Class	Pay Code					
14372	TRIAGE, LLC										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	INV1796984394		07/15/202	07/05/202	08/04/202			3,467.50	0.00	0.00	3,467.50
		RAD STAFFING									
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
		14372	TRIAGE, LLC					3,467.50	0.00	0.00	3,467.50
Vendor#	Vendor Name				Class	Pay Code					
11067	TRIZETTO PROVIDER SOLUTIONS										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	35FK072400		07/15/202	07/01/202	07/26/202			1,587.97	0.00	0.00	1,587.97
		PT STATEMENTS									
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
		11067	TRIZETTO PROVIDER SOLUTIONS					1,587.97	0.00	0.00	1,587.97
Vendor#	Vendor Name				Class	Pay Code					
U1064	UNIFIRST HOLDINGS INC										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	2921037323		07/01/202	07/01/202	07/26/202			102.07	0.00	0.00	102.07
		LAUNDRY									
	2921037322		07/01/202	07/01/202	07/26/202			3,003.04	0.00	0.00	3,003.04
		LAUNDRY									
	2921036481		07/10/202	07/04/202	08/03/202			318.12	0.00	0.00	318.12
		LAUNDRY									
	2921036479		07/10/202	07/04/202	08/03/202			2,586.71	0.00	0.00	2,586.71
		LAUNDRY									
	2921036484		07/10/202	07/04/202	08/03/202			113.81	0.00	0.00	113.81
		LAUNDRY									
	2921036477		07/10/202	07/04/202	08/03/202			133.29	0.00	0.00	133.29
		LAUNDRY									
	2921036483		07/10/202	07/04/202	08/03/202			224.22	0.00	0.00	224.22
		LAUNDRY									
	2921036482		07/10/202	07/04/202	08/03/202			282.90	0.00	0.00	282.90
		LAUNDRY									
	2921037098		07/15/202	07/11/202	08/05/202			234.50	0.00	0.00	234.50
	2921036736A		07/18/202	06/25/202	07/20/202			103.60	0.00	0.00	103.60
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
		U1064	UNIFIRST HOLDINGS INC					7,102.26	0.00	0.00	7,102.26
Vendor#	Vendor Name				Class	Pay Code					
12400	UPDOX LLC										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	INV00491063A		07/15/202	03/31/202	04/30/202			1,488.14	0.00	0.00	1,488.14
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
		12400	UPDOX LLC					1,488.14	0.00	0.00	1,488.14
Vendor#	Vendor Name				Class	Pay Code					
12208	WAGEWORKS										
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
	INV6699763		07/15/202	06/25/202	07/25/202			554.00	0.00	0.00	554.00
		MONTHLY COMPLIANCE/FSA June 2024									
	Vendor Totals:	Number	Name					Gross	Discount	No-Pay	Net
		12208	WAGEWORKS					554.00	0.00	0.00	554.00
Vendor#	Vendor Name				Class	Pay Code					
11110	WERFEN USA LLC										

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
9310053360		07/01/202	07/08/202	08/09/202			-790.65	0.00	0.00	-790.65
	SUPPLIES CREDIT									
9310053284		07/01/202	07/08/202	08/09/202			-1,210.80	0.00	0.00	-1,210.80
	SUPPLIES CREDIT									
9111556490		07/17/202	07/15/202	08/09/202			7,710.00	0.00	0.00	7,710.00
	SUPPLIES									

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	I1110	WERFEN USA LLC	5,708.55	0.00	0.00	5,708.55

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	153,057.42	0.00	0.00	153,057.42

APPROVED ON

JUL 1 8 2024

BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

RUN DATE: 07/18/24 RECEIVED BY THE COUNTY AUDITOR ON MEMORIAL MEDICAL CENTER PAGE 1
TIME: 13:45 EDIT LIST FOR PATIENT REFUNDS ARID=0001 APCDEDIT

JUL 18 2024

CALHOUN COUNTY, TEXAS

PATIENT NUMBER	PAYEE NAME		DATE	AMOUNT	PAY CODE	PAT TYPE	DESCRIPTION	GL NUM
1588898	01 [redacted]		071824	250.00		3	REFUND FOR [redacted]	
	V0E1B4							
1591267	01 [redacted]		071824	453.80		2	REFUND FOR [redacted]	
		TX	77979					
1600476	01 [redacted]		071824	37.04		2	REFUND FOR [redacted]	
		TX	77950					
1600680	01 [redacted]		071824	30.00		2	REFUND FOR [redacted]	
		TX	77979					
1602010	01 [redacted]		071824	20.00		2	REFUND FOR [redacted]	
		TX	77979					
1603303	01 [redacted]		071824	30.00		2	REFUND FOR [redacted]	
		TX	77983					
	ARID=0001 TOTAL			820.84				
TOTAL				820.84				

APPROVED ON

JUL 18 2024

BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

McKESSON

Company: 8000

STATEMENT

As of: 07/19/2024

Page: 002

MEMORIAL MEDICAL CENTER
AP
815 N VIRGINIA STREET
PORT LAVACA TX 77979

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

DC: 8115
Customer INV SuppID:
Territory:

Customer: 632536
Date: 07/20/2024

To ensure proper credit to your account, detach and return this stub with your remittance

As of: 07/19/2024 Page: 002
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 632536 PLEASE CHECK ANY
Date: 07/20/2024 ITEMS NOT PAID (✓)

National Account 632536

Billing Date	Due Date	Receivable Number	Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number	

PF column legend: P = Past Due Item, F = Future Due Item, blank = Current Due Item

TOTAL: National Acct 632536 MEMORIAL MEDICAL CENTER

Subtotals: 35,074.58 USD

Future Due:	0.00				Due If Paid On Time: USD 34,373.02
Past Due:	0.00	If Paid By 07/23/2024, Pay This Amount:	34,373.02	USD	Disc lost If paid late: 701.56
Last Payment 08/07/2017	2,451.97	If Paid After 07/23/2024, Pay this Amount:	35,074.58	USD	Due If Paid Late: USD 35,074.58

✓ Andrea [signature]
7/22/2024

34,302.34 +
69.56 +
1.12 +
34,373.02 ◇

APPROVED ON
JUL 22 2024
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

For AR Inquiries please contact 800-867-0333

McKESSON

STATEMENT

Company 8000

WALMART 1098/MEM MED PHS
MEMORIAL MEDICAL CENTER
VICKY KALISEK
815 N VIRGINIA ST
PORT LAVACA TX 77979

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

As of: 07/19/2024

Page: 001

DC: 8115
Customer INV SuppID:
Territory: 7001

Customer: 256342
Date: 07/20/2024

To ensure proper credit to your account, detach and return this stub with your remittance

As of: 07/19/2024 Page: 001
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 256342 PLEASE CHECK ANY
Date: 07/20/2024 ITEMS NOT PAID (✓)

National Account 632536

Billing Date	Due Date	Receivable Number	Order Reference	Description	Cash Discount	Amount (gross)	PF	Amount (net)	PF	Receivable Number	
Customer Number 256342 WALMART 1098/MEM MED PHS											
07/13/2024	07/23/2024	7508242441	204051622	115Invoice	31.90	1,595.06		1,563.16		7508242441	
07/13/2024	07/23/2024	7508242442	112952972	115Invoice	1.81	90.41		88.60		7508242442	
07/13/2024	07/23/2024	7508242443	113238732	115Invoice	1.81	90.41		88.60		7508242443	
07/13/2024	07/23/2024	7508242444	201482908	115Invoice	1.81	90.41		88.60		7508242444	
07/13/2024	07/23/2024	7508242445	201628656	115Invoice	1.81	90.41		88.60		7508242445	
07/13/2024	07/23/2024	7508242446	200545552	115Invoice	0.01	0.32		0.31		7508242446	
07/13/2024	07/23/2024	7508242447	113950158	115Invoice	0.02	1.06		1.04		7508242447	
07/13/2024	07/23/2024	7508245774	113031048	115Invoice	0.01	0.33		0.32		7508245774	
07/13/2024	07/23/2024	7508245775	114351743	115Invoice	0.02	0.98		0.96		7508245775	
07/13/2024	07/23/2024	7508245776	115438832	115Invoice	0.01	0.33		0.32		7508245776	
07/13/2024	07/23/2024	7508245777	201257403	115Invoice	0.02	0.82		0.80		7508245777	
07/13/2024	07/23/2024	7508245778	113031048	115Invoice	12.51	625.47		612.96		7508245778	
07/13/2024	07/23/2024	7508245779	113163410	115Invoice	6.25	312.73		306.48		7508245779	
07/13/2024	07/23/2024	7508245780	113950158	115Invoice	12.51	625.47		612.96		7508245780	
07/13/2024	07/23/2024	7508245781	115893496	115Invoice	12.51	625.47		612.96		7508245781	
07/13/2024	07/23/2024	7508245782	116270035	115Invoice	12.51	625.47		612.96		7508245782	
07/13/2024	07/23/2024	7508245783	202213453	115Invoice	3.29	164.31		161.02		7508245783	
07/13/2024	07/23/2024	7508245784	114603161	115Invoice	1.66	82.82		81.16		7508245784	
07/13/2024	07/23/2024	7508245785	114849568	115Invoice	1.66	82.82		81.16		7508245785	
07/13/2024	07/23/2024	7508245786	115828316	115Invoice	1.66	82.82		81.16		7508245786	
07/13/2024	07/23/2024	7508245787	116270035	115Invoice	1.66	82.82		81.16		7508245787	
07/13/2024	07/23/2024	7508245788	116384277	115Invoice	3.31	165.63		162.32		7508245788	
07/13/2024	07/23/2024	7508245789	200177764	115Invoice	1.66	82.82		81.16		7508245789	
07/13/2024	07/23/2024	7508245790	203279868	115Invoice	1.66	82.82		81.16		7508245790	
07/13/2024	07/23/2024	7508245791	204471952	115Invoice	1.41	70.68		69.27		7508245791	
07/13/2024	07/23/2024	7508245792	113087848	115Invoice	15.63	781.45		765.82		7508245792	
07/13/2024	07/23/2024	7508245793	116270035	115Invoice	31.26	1,562.90		1,531.64		7508245793	
07/13/2024	07/23/2024	7508245794	112784091	115Invoice	6.63	331.55		324.92		7508245794	
07/13/2024	07/23/2024	7508245795	113094252	115Invoice	46.42	2,320.86		2,274.44		7508245795	
07/13/2024	07/23/2024	7508245796	113659886	115Invoice	0.47	23.56		23.09		7508245796	
07/13/2024	07/23/2024	7508245797	113817834	115Invoice	39.82	1,991.20		1,951.38		7508245797	

For AR Inquiries please contact 800-867-0333

McKESSON

Company: 8000

STATEMENT

As of: 07/19/2024

Page: 002

DC: 8115
Customer INV SuppID:
Territory: 7001

Customer: 256342
Date: 07/20/2024

WALMART 1098/MEM MED PHS
MEMORIAL MEDICAL CENTER
VICKY KALISEK
815 N VIRGINIA ST
PORT LAVACA TX 77979

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

To ensure proper credit to your account, detach and return this stub with your remittance

As of: 07/19/2024 Page: 002
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 256342 PLEASE CHECK ANY
Date: 07/20/2024 ITEMS NOT PAID (✓)

National Account 632536

Billing Date	Due Date	Receivable Number	Order Reference	Description	Cash Discount	Amount (gross)	PF	Amount (net)	PF	Receivable Number	
07/13/2024	07/23/2024	7508245798	114603161	115Invoice	6.64	331.87		325.23		7508245798	
07/13/2024	07/23/2024	7508245799	115376742	115Invoice	19.91	995.60		975.69		7508245799	
07/13/2024	07/23/2024	7508245900	115398041	115Invoice	26.55	1,327.47		1,300.92		7508245900	
07/13/2024	07/23/2024	7508245901	113260714	115Invoice	32.90	1,644.84		1,611.94		7508245901	
07/13/2024	07/23/2024	7508245902	112952239	115Invoice	16.45	822.51		806.06		7508245902	
07/13/2024	07/23/2024	7508245903	114462204	115Invoice	16.44	822.11		805.67		7508245903	
07/13/2024	07/23/2024	7508245904	114980753	115Invoice	16.41	820.44		804.03		7508245904	
07/13/2024	07/23/2024	7508245905	112941228	115Invoice	32.78	1,639.04		1,606.26		7508245905	
07/13/2024	07/23/2024	7508245906	113031048	115Invoice	32.78	1,639.04		1,606.26		7508245906	
07/13/2024	07/23/2024	7508245907	203299533	115Invoice	38.49	1,924.71		1,886.22		7508245907	
07/13/2024	07/23/2024	7508245908	113031048	115Invoice	0.01	0.71		0.70		7508245908	
07/13/2024	07/23/2024	7508245909	114603161	115Invoice		0.10		0.10		7508245909	
07/13/2024	07/23/2024	7508245910	113224698	115Invoice	5.32	266.10		260.78		7508245910	
07/15/2024	07/23/2024	7508488625	116567149	115Invoice	5.23	261.50		256.27		7508488625	
07/15/2024	07/23/2024	7508488626	202614007	115Invoice	6.28	314.01		307.73		7508488626	
07/15/2024	07/23/2024	7508488627	200177764	115Invoice	20.83	1,041.28		1,020.45		7508488627	
07/15/2024	07/23/2024	7508502945	113659886	115Invoice	0.47	23.56		23.09		7508502945	
07/16/2024	07/23/2024	7508778770	113659886	115Invoice	0.01	0.32		0.31		7508778770	
07/16/2024	07/23/2024	7508778771	202717043	115Invoice	0.69	34.32		33.63		7508778771	
07/16/2024	07/23/2024	7508778772	204177320	115Invoice	2.46	122.85		120.39		7508778772	
07/17/2024	07/23/2024	7509045616	203760944	115Invoice	22.67	1,133.37		1,110.70		7509045616	
07/17/2024	07/23/2024	7509045617	203986466	115Invoice	22.67	1,133.37		1,110.70		7509045617	
07/17/2024	07/23/2024	7509045618	114911863	115Invoice	0.01	0.63		0.62		7509045618	
07/17/2024	07/23/2024	7509045619	201077442	115Invoice	0.01	0.63		0.62		7509045619	
07/17/2024	07/23/2024	7509045620	201257403	115Invoice	0.01	0.63		0.62		7509045620	
07/17/2024	07/23/2024	7509045621	115058401	115Invoice	4.10	204.94		200.84		7509045621	
07/17/2024	07/23/2024	7509050996	205147848	115Invoice	0.83	41.42		40.59		7509050996	
07/17/2024	07/23/2024	7509050997	116332519	115Invoice	0.01	0.32		0.31		7509050997	
07/17/2024	07/23/2024	7509050999	114447481	115Invoice	0.01	0.32		0.31		7509050999	
07/17/2024	07/23/2024	7509054601	115684224	115Invoice	0.01	0.63		0.62		7509054601	
07/17/2024	07/23/2024	7509054602	113278317	115Invoice	0.01	0.32		0.31		7509054602	

For AR Inquiries please contact 800-867-0333

MCKESSON

Company: 8000

WALMART 1098/MEM MED PHS
MEMORIAL MEDICAL CENTER
VICKY KALISEK
815 N VIRGINIA ST
PORT LAVACA TX 77979

STATEMENT

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

As of: 07/19/2024

Page: 003

DC: 8115
Customer INV SuppID:
Territory: 7001

Customer: 256342
Date: 07/20/2024

To ensure proper credit to your account, detach and return this stub with your remittance

As of: 07/19/2024 Page: 003
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 256342 PLEASE CHECK ANY
Date: 07/20/2024 ITEMS NOT PAID (✓)

National Account 632536

Billing Date	Due Date	Receivable Number	Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number	
07/17/2024	07/23/2024	7509054603	113491644	115Invoice	0.01	0.63		0.62		7509054603	
07/18/2024	07/23/2024	7509302247	203535470	115Invoice	0.01	0.32		0.31		7509302247	
07/18/2024	07/23/2024	7509302248	114067645	115Invoice	0.01	0.63		0.62		7509302248	
07/18/2024	07/23/2024	7509302249	114204504	115Invoice	0.01	0.32		0.31		7509302249	
07/18/2024	07/23/2024	7509302250	115285509	115Invoice	1.34	66.99		65.65		7509302250	
07/18/2024	07/23/2024	7509302251	205269451	115Invoice	0.02	1.06		1.04		7509302251	
07/18/2024	07/23/2024	7509308193	114735193	115Invoice	18.67	933.28		914.61		7509308193	
07/18/2024	07/23/2024	7509308194	116672418	115Invoice	0.25	12.67		12.42		7509308194	
07/18/2024	07/23/2024	7509308195	113659886	115Invoice	0.01	0.63		0.62		7509308195	
07/18/2024	07/23/2024	7509308196	114603161	115Invoice	0.01	0.32		0.31		7509308196	
07/19/2024	07/23/2024	7509539607	115222714	115Invoice	0.01	0.32		0.31		7509539607	
07/19/2024	07/23/2024	7509539608	203986466	115Invoice	45.33	2,266.73		2,221.40		7509539608	
07/19/2024	07/23/2024	7509539609	204021746	115Invoice	45.33	2,266.73		2,221.40		7509539609	
07/19/2024	07/23/2024	7509539610	205374099	115Invoice	0.83	41.42		40.59		7509539610	
07/19/2024	07/23/2024	7509539611	114204504	115Invoice	0.01	0.32		0.31		7509539611	
07/19/2024	07/23/2024	7509539612	116332519	115Invoice	0.01	0.32		0.31		7509539612	
07/19/2024	07/23/2024	7509539613	205147648	115Invoice	0.01	0.32		0.31		7509539613	
07/19/2024	07/23/2024	7509539614	115684224	115Invoice	0.01	0.32		0.31		7509539614	
07/19/2024	07/23/2024	7509549550	203279868	115Invoice	0.69	34.32		33.63		7509549550	
07/19/2024	07/23/2024	7509549551	204141306	115Invoice	0.69	34.32		33.63		7509549551	
07/19/2024	07/23/2024	7509549552	204242442	115Invoice	0.69	34.32		33.63		7509549552	
07/19/2024	07/23/2024	7509549553	113659886	115Invoice	1.41	70.68		69.27		7509549553	
07/19/2024	07/23/2024	7509549554	114735193	115Invoice	0.01	0.63		0.62		7509549554	
07/19/2024	07/23/2024	7509549555	204593281	115Invoice	0.01	0.32		0.31		7509549555	
07/19/2024	07/23/2024	7509549557	115622000	115Invoice	0.01	0.32		0.31		7509549557	
07/19/2024	07/23/2024	7509549558	205147648	115Invoice	0.02	0.95		0.93		7509549558	
07/19/2024	07/23/2024	7509549559	114134342	115Invoice		0.10		0.10		7509549559	

For AR Inquiries please contact 800-867-0333

McKESSON

STATEMENT

Company: 8000

WALMART 1098/MEM MED PHS
MEMORIAL MEDICAL CENTER
VICKY KALISEK
815 N VIRGINIA ST
PORT LAVACA TX 77979

AMT DUE REMITTED VIA ACH DEBIT
Statement for Information only

As of: 07/19/2024

Page: 004

DC: 8115
Customer INV SuppID:
Territory: 7001

Customer: 256342
Date: 07/20/2024

To ensure proper credit to your account, detach and return this stub with your remittance

As of: 07/19/2024 Page: 004
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 256342 PLEASE CHECK ANY
Date: 07/20/2024 ITEMS NOT PAID (✓)

National Account 632536

Billing Date	Due Date	Receivable Number	Order Reference	Description	Cash Discount	Amount (gross)	PF	Amount (net)	PF	Receivable Number	

PF column legend: P = Past Due Item, F = Future Due Item, blank = Current Due Item

TOTAL: Customer Number 256342 WALMART 1098/MEM MED PHS

Subtotals: 35,002.46 USD

Future Due:	0.00			Due If Paid On Time: USD	34,302.34
Past Due:	0.00	If Paid By 07/23/2024, Pay This Amount:	34,302.34 USD	Disc lost if paid late:	700.12
Last Payment 07/15/2024	2,647.84	If Paid After 07/23/2024, Pay this Amount:	35,002.46 USD	Due If Paid Late: USD	35,002.46

Andrea [illegible]
7/22/2024

APPROVED ON
JUL 22 2024
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

For AR Inquiries please contact 800-867-0333

MCKESSON

Company. 8000

STATEMENT

As of: 07/19/2024 Page: 001

DC: 8115
Customer INV SuppID:
Territory: 7001

Customer: 820405
Date: 07/20/2024

HEB PHCY WHSE/MEM MED PHS
MEMORIAL MEDICAL CENTER
VICKY KALISEK
815 N VIRGINIA ST
PORT LAVACA TX 77979

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

To ensure proper credit to your account, detach and return this stub with your remittance

As of: 07/19/2024 Page: 001
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 820405 PLEASE CHECK ANY
Date: 07/20/2024 ITEMS NOT PAID (✓)

National Account 632536

Billing Date	Due Date	Receivable Number	Order Reference	Description	Cash Discount	Amount (gross)	PF	Amount (net)	PF	Receivable Number	
Customer Number 820405 HEB PHCY WHSE/MEM MED PHS											
07/16/2024	07/23/2024	7508591530	B2407-055-166559	115Invoice	0.98	49.02		48.04 X		7508591530	
07/17/2024	07/23/2024	7508863758	B2407-055-166703	115Invoice	0.41	20.33		19.92 X		7508863758	
07/19/2024	07/23/2024	7509355959	B2407-055-167004	115Invoice	0.03	1.63		1.60 X		7509355959	

PF column legend: P = Past Due Item, F = Future Due Item, blank = Current Due Item

TOTAL: Customer Number 820405 HEB PHCY WHSE/MEM MED PHS

Subtotals: 70.98 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 07/15/2024 2,647.84

If Paid By 07/23/2024, Pay This Amount: 69.56 USD

If Paid After 07/23/2024, Pay this Amount: 70.98 USD

Due If Paid On Time: USD 69.56 X

Disc lost if paid late: 1.42

Due If Paid Late: USD 70.98

APPROVED ON

JUL 22 2024

BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

Candice Villarreal Santos
7/22/24

For AR Inquiries please contact 800-867-0333

McKESSON

Company: 8000

STATEMENT

As of: 07/19/2024 Page: 001

DC: 8115
Customer INV SuppID:
Territory: 7001

Customer: 835437
Date: 07/20/2024

CVS PHCY 7416/MEM MC PHS
MEMORIAL MEDICAL CENTER
VICKY KALISEK
815 N VIRGINIA ST
PORT LAVACA TX 77979

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

To ensure proper credit to your account, detach and return this stub with your remittance

As of: 07/19/2024 Page: 001
Mail to: Comp: 8000

AMT DUE REMITTED VIA ACH DEBIT
Statement for information only

Cust: 835437 **PLEASE CHECK ANY**
Date: 07/20/2024 **ITEMS NOT PAID (✓)**

National Account 632536

Billing Date	Due Date	Receivable Number	Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number	
Customer Number 835437 CVS PHCY 7416/MEM MC PHS											
07/17/2024	07/23/2024	7509066677	3386770	115Invoice	0.02	1.14		1.12 X		7509066677	

PF column legend: P = Past Due Item, F = Future Due Item, blank = Current Due Item

TOTAL: Customer Number 835437 CVS PHCY 7416/MEM MC PHS

Subtotals: 1.14 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 07/15/2024 2,847.84

If Paid By 07/23/2024, Pay This Amount: 1.12 USD

If Paid After 07/23/2024, Pay this Amount: 1.14 USD

Due If Paid On Time: USD 1.12 X

Disc lost if paid late: 0.02

Due If Paid Late: USD 1.14

APPROVED ON
JUL 22 2024
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Andrea Lee Santos
7/22/2024

For AR Inquiries please contact 800-867-0333

AmerisourceBergen

STATEMENT

Statement Number: 67859285
Date: 07-19-2024

Serviced By:
AMERISOURCEBERGEN DRUG CORP
12727 W. AIRPORT BLVD.
SUGAR LAND TX 77478-6101

DEA: RA0289276
866-451-9655

Customer:
WALGREENS #12494 340B
MEMORIAL MEDICAL CENTER
1302 N VIRGINIA ST
PORT LAVACA TX 77979-2509

Remit To:
AMERISOURCEBERGEN
PO Box 905223
CHARLOTTE NC 28290-5223

Customer Number
100135284 / 037028186

Terms
Sat - Fri Due in 7 days

Summary

Not Yet Due:	0.00
Current:	359.66
Past Due:	0.00
Total Due:	359.66
Account Balance:	359.66

Account Activity

Document Date	Due Date	Reference Number	Purchase Order Number	Document Type	Original Amount	Last Receipt	Amount Received	Balance
07-15-2024	07-26-2024	3181686280	7007054287	Invoice	24.73		0.00	24.73
07-15-2024	07-26-2024	3181686281	7007062460	Invoice	48.42		0.00	48.42
07-15-2024	07-26-2024	3181686282	7007073227	Invoice	79.46		0.00	79.46
07-15-2024	07-26-2024	3181686283	7007063239	Invoice	21.19		0.00	21.19
07-16-2024	07-26-2024	3181847850	7007079848	Invoice	5.66		0.00	5.66
07-17-2024	07-26-2024	3182004283	7007087174	Invoice	79.06		0.00	79.06
07-17-2024	07-26-2024	360096062	,CRO	Invoice	(29.76)		0.00	(29.76)
07-18-2024	07-26-2024	3182142413	7007099409	Invoice	53.76		0.00	53.76
07-19-2024	07-26-2024	3182301944	7007105710	Invoice	77.14		0.00	77.14

Current	1-15 Days	16-30 Days	31-60 Days	61-90 Days	91-120 Days	Over 120 Days
359.66	0.00	0.00	0.00	0.00	0.00	0.00

Thank You for Your Payment

Date	Amount
07-19-2024	(2,530.36)

APPROVED ON
JUL 2 2 2024
BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

Reminders

Due Date	Amount
07-26-2024	359.66
Total Due:	359.66

Andrew DeCoss Santos
7/22/2024

CITIBANK CORPORATE CARD

Account Statement

Commercial Card Account
ERIN CLEVENGER

citi

Account Inquiries:

Toll Free:	1-(800)-248-4553
International:	1-(904)-954-7314
TDD/TTY:	1-(877)-505-7276

Account Number: XXXX-XXXX-XXXX-[redacted]

Summary of Account Activity

Total Activity	$2,439.96

Send Notice of Billing Errors and Customer Service Inquiries to:
CITIBANK, N.A., PO BOX 6125, SIOUX FALLS SD 57117-6125

Not an invoice. For your records only.

Credit Limit	$20,000
Cash Advance Limit	$5,000
Statement Closing Date	07/03/2024
Days in Billing Period	30

Transactions

Post Date	Trans Date	MCC	Reference Number		Description/Location					Amount
			NOTICE MEMO ITEM(S) LISTED BELOW							
06/04	06/03	9399	05134374156600070372723	1	NPDB NPDB.HRSA.GOV N109473244	FAIRFAX	VA	22033	USA	5.00
06/11	06/11	8999	55432864163200731073804	2	AMA*CREDENTIALING	800-621-8335	IL	60611	USA	44.00
06/12	06/12	8299	55432864164201097427261	3	AWL*PEARSON EDUCATION	PRSONCS.COM	NJ		USA	27.50
06/13	06/11	3066	55432864164201217540381	4	SOUTHWES 5262525402619 800-435-9792 RESENDEZ/KIMBERLY DEPARTURE: 06/05/24 HOU WN U STL WN E HOU		TX	75235	USA	486.96
06/17	06/14	9399	05134374167600071038270	5	NPDB NPDB.HRSA.GOV N110041350	FAIRFAX	VA	22033	USA	2.50
06/17	06/14	9399	05134374167600071038353	6	NPDB NPDB.HRSA.GOV N110041732	FAIRFAX	VA	22033	USA	2.50
06/17	06/15	8999	55432864167202022287843	7	AMA*CREDENTIALING	800-621-8335	IL	60611	USA	44.00
07/02	07/01	9399	05134374184600096467404	8	NPDB NPDB.HRSA.GOV N110793572	FAIRFAX	VA	22033	USA	50.00
07/02	07/01	9399	05134374184600098467578	9	NPDB NPDB HRSA.GOV N110793942	FAIRFAX	VA	22033	USA	2.50
07/03	07/02	8734	55457374184007286008828	10	INTOXIMETERS INC	SAINT LOUIS	MO	63146	USA	1,775.00
									TOTAL AMOUNT OF MEMO ITEM(S):	$2,439.96

APPROVED ON
JUL 2 2 2024
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

NOTICE: SEE REVERSE SIDE FOR IMPORTANT INFORMATION

citi · CITIBANK N.A.
PO BOX 6125
SIOUX FALLS SD 57117-6125

Account Number	XXXX-XXXX-XXXX-[redacted]
Statement Closing Date	July 03 2024

Not an invoice.
For your records only.

ERIN CLEVENGER
202 S ANN ST., STE A
PORT LAVACA TX 77979-4204

00010079643

MEMORIAL MEDICAL CENTER
PURCHASE ORDER

Bill To: 815 N. VIRGINIA ST.
PORT LAVACA, TX 77979
PHONE: (361) 552-6713
FAX: (361) 552-0312

Ship To: 815 N. VIRGINIA ST.
PORT LAVACA, TX 77979
PHONE: (361) 552-6713
FAX: (361) 552-0312

5.00 +
44.00 +
486.96 +
2.50 +
2.50 +
44.00 +
50.00 +
2.50 +
27.50 +
1,775.00 +
[illegible] ◇

Vendor Name: Citibank

7/10/2024

Vendor Address:

Vendor Phone #:

Account #

Vendor Fax #:

Approved By:

Date Required

Expense #

Deliver To

Form # 9401

Line No.	Qty.	Catalog Number	Description	Unit Cost	Unit Meas.	Extended Cost
1	—	40510090	NPDB - x2 Renewals			✓ 5.00
2	—	40510090	AMA Credentialing - 1 Physician			✓ 44.00
3			Init + Cont. Monitoring			
4	—	40600020	Southwest - Flights for	HTX to Detroit	8/5 - 8/9	✓ 486.96
5			Kim Resendez - Lab Training			
6	—	40510090	NPDB · x1 Enrollment			✓ 2.50
7	—	40510090	" "			✓ 2.50
8	—	40510090	AMA Credentialing - 1 Phy			✓ 44.00
9			Init + Cont. Monitoring			
10	—	40510090	NPDB · x20 Renewals			✓ 50.00
	—	40510090	NPDB - x1 Renewal			✓ 2.50

Est. Freight   **Est. Total Cost**   **TOTAL COST**

NOTES:

Charges made to credit card
- Pearson - X10 Sensory Profile 2 Tx Group. ✓ 27.50
- [illegible] ✓ 1775.00

Contact: **Date:**

Quoted By:

Buyer: **E.T.A.**

Dept. Director Total # 2,439.96

Dir. Nursing

Dir. Clinical Services

CFO

Administrator [signature]

TOLL FEE PHONE NUMBER: 1-800-555-3453
(EFTPS TUTORIAL SYSTEM: 1-800-572-8683)

		ENTER:	
"ENTER 9-DIGIT TAXPAYER IDENTIFICATION NUMBER"	#### ###		
"ENTER YOUR 4-DIGIT PIN"			
"MAKE A PAYMENT, PRESS 1"		1	
"ENTER THE TAX TYPE NUMBER FOLLOWED BY THE # SIGN"	★	941	#
"IF FEDERAL TAX DEPOSIT ENTER 1"		1	
"ENTER 2-DIGIT TAX FILING YEAR"	★	24	
"ENTER 2-DIGIT TAX FILING ENDING MONTH"	★	09	

1ST QTR - 03 (MARCH) - Jan, Feb, Mar
2ND QTR - 06 (JUNE) - Apr, May, June
3RD QTR - 09 (SEPTEMBER) - July, Aug, Sept
4TH QTR - 12 (DECEMBER) - Oct, Nov, Dec

		ENTER:	
"ENTER AMOUNT OF TAX DEPOSIT - FOLLOWED BY # SIGN"	★	$ 315.56	#
"1 TO CONFIRM"		1	
"ENTER W/CENTS AMOUNT OF SOCIAL SECURITY"	0	$ 159.96	#
"ENTER W/CENTS AMOUNT OF MEDICARE"		$ 37.42	#
"ENTER W/CENTS AMOUNT OF FEDERAL WITHHOLDING"		$ 118.18	#
"6-DIGIT SETTLEMENT DATE"	★		
"1 TO CONFIRM"		1	
ACKNOWLEDGEMENT NUMBER			

CALLED IN BY:	
CALLED IN DATE:	
CALLED IN TIME:	

941 REC/TAX DEPOSIT FOR MMC PAYROLL

REVISED *3/18/2014*

ENTER VOID CKS AS NEGATIVE NUMBERS

		VOIDED CK (1)	VOIDED CK (2)	ADDITIONAL CK (1)	ADDITIONAL CK (1)	TOTALS
PAY PERIOD: BEGIN	6/28/2024					
PAY PERIOD: END	7/11/2024					
PAY DATE:	7/24/2024					
GROSS PAY:	$ 1,290.00			$ -		$ 1,290.00
DEDUCTIONS:						
A/R	$ -					$ -
ADVANC						$ -
BOOTS						$ -
MUTUAL CRITICAL ILLNESS						$ -
MUTUAL ACCIDENT						$ -
IRS TAX						$ -
MUTUAL SHORT TERM DIS						$ -
MUTUAL VISION	$ -					$ -
CAFÉ-D	$ -					$ -
CAFÉ-H	$ -					$ -
	$ -					$ -
	$ -					$ -
CAFÉ-P						$ -
CANCER						$ -
CHILD	$ -					$ -
CLINIC	$ -					$ -
COMBIN	$ -					$ -
CREDUN	$ -					$ -
DENTAL	$ -					$ -
DEP-LF						$ -
MUTUAL TERM LIFE	$ -					$ -
MUTUAL HOSP INDEM	$ -					$ -
FED TAX	$ 118.18					$ 118.18
FICA-M	$ 18.71					$ 18.71
FICA-O	$ 79.98					$ 79.98
FICA-M ADDITIONAL						$ -
FIRST C						$ -
FLEX S	$ -					$ -
FLX-FE	$ -					$ -
GIFT S	$ -					$ -
MUTUAL CRITICAL ILLNESS	$ -					$ -
MUTUAL ACCIDENT	$ -					$ -
MUTUAL SHORT TERM DIS	$ -					$ -
LEGAL	$ -					$ -
OTHER	$ -					$ -
NATIONAL FARM LIFE	$ -					$ -
MED SURCHARGE	$ -					$ -
Blank						$ -
RELAY						$ -
REPAY						$ -
STONEDF	$ -					$ -
STONE						$ -
STONE 2						$ -
STUDEN						$ -
TSA-R	$ -					$ -
UW/HOS	$ -					$ -
TOTAL DEDUCTIONS:	$ 216.87	$ -	$ -	$ -	$ -	$ 216.87
	SHOULD MATCH REPORT	**SHOULD MATCH REPORT**	**SHOULD MATCH REPORT**	**SHOULD MATCH REPORT**	**SHOULD MATCH REPORT**	
NET PAY:	$ 1,073.13	$ -	$ -	$ -	$ -	$ 1,073.13
	SHOULD MATCH REPORT	**SHOULD MATCH REPORT**	**SHOULD MATCH REPORT**	**SHOULD MATCH REPORT**	**SHOULD MATCH REPORT**	
TOTAL CAFÉ 125 PLAN:	$ -	Less Exempt:				
TAXABLE PAY:	$ 1,290.00	$ 1,290.00				Exempt Amt:

		CALCULATED	From MMC Report	Difference
FICA - MED (ER)	1.45%	$ 18.71		
FICA - MED (EE)	1.45%	$ 18.71	$ 18.71	$ -
FICA - SOC SEC (ER)	6.20%	$ 79.98		
FICA - SOC SEC (EE)	6.20%	$ 79.98	$ 79.98	$ -
FED WITHHOLDING		$ 118.18	$ 118.18	

Employees over FICA-SS Cap:
Michael Gaines

Paycode S - Employee Reimb.:

TOTAL: $ -

TAX DEPOSIT:		$ 315.56	$ 315.56	
FICA - MEDICARE	2.90%	$ 37.42	$37.42	
FICA - SOCIAL SECURITY	12.40%	$ 159.96	$159.96	
FED WITHHOLDING		$ 118.18	$118.18	
TOTAL TAX:		$ 315.56	$315.56	$ -

PREPARED BY: Caitlin Clevenger

PREPARED DATE: 7/22/2024

Run Date: 07/22/24
Time: 09:14

MEMORIAL MEDICAL CENTER
Payroll Register (Bi-Weekly)
Pay Period 06/26/24 - 07/11/24 Run# 2

Final Summary

--- PayCode Summary --- / --- Deductions Summary ---

PayCd	Description	Hrs	OT	SH	WE	HO	CB	Gross	Code	Amount	Code	Amount	Code	Amount
P		86.00	N		N	N	N	1290.00	A/R		A/R2		A/R3	
									ADVANC		AWARDS		BCBSVI	
									BOOTS		CAFE H		CAFE-1	
									CAFE-2		CAFE-3		CAFE-4	
									CAFE-5		CAFE-C		CAFE-D	
									CAFE-F		CAFE-H		CAFE-I	
									CAFE-L		CAFE-P		CANCER	
									CHILD		CLINIC		COMBIN	
									CREDUN		DD ADV		DENTAL	
									DEP-LF		DIS-LF		EAT	
									EATCSH		FEDTAX	118.18	FICA-M	18.71
									FICA-O	79.98	FIRSTC		FLEX S	
									FLX FE		FORT D		FUTA	
									GIFT S		GRANT		GRP-IN	
									GTL		HOSP-I		HSA	
									ID TFT		IRSTAX		LEAF	
									LEGAL		MASA		MEALS	
									METVIS		MISC		MISC/	
									MMCSHR		MOOACC		MOOILL	
									MOOIND		MOOLIF		MOOSTD	
									MOOVIS		NATFML		OTHER	
									PHI		PHI***		PR FIN	
									RELAY		REPAY		SAMS	
									SCRUBS		SIGNON		ST-TX	
									STONDF		STONE		STONE2	
									STUDEN		SUNACC		SUNILL	
									SUNIND		SUNLIF		SUNSTD	
									SUNVIS		SURCHG		TSA-1	
									TSA-2		TSA-C		TSA-P	
									TSA-R		TUTION		UNIFOR	
									UW/HOS					

Grand Totals: 86.00 (Gross: 1290.00 Deductions: 216.87 Net: 1073.13)

| Checks Count:- FT | PT | Other | 1 Female | 1 Male | Credit | OverAmt | ZeroNet | Term | Total: 1 |

Andrew De Los Santos
7/22/24

MEMORIAL MEDICAL CENTER
PROSPERITY BANK
ELECTRONIC TRANSFERS FOR OPERATING ACCOUNT — July 15, 2024 - July 21, 2024

Date	Bank Description	MMC Notes	Amount	CPSI "Handwritten Check" #
7/19/2024	WEBFILE TAX PYMT DD 902/76255713 21000026994	- Sales Tax	1,986.52	700136
7/19/2024	PAY PLUS ACHTrans 000000029710006 1010006997	- 3rd Party Payor Fee	237.67	901274
7/19/2024	EXPERTPAY EXPERTPAY 746003411 91000013181407	-Child Support Payment	570.69	800553
7/19/2024	AMERISOURCE BERG PAYMENTS 0100007768 2100002	- 340B Drug Program Expense	2,530.36	500621
7/19/2024	MEMORIAL MEDICAL PAYROLL 746003411 113122650	- Payroll	397,607.77	
7/18/2024	PAY PLUS ACHTrans 000000029557762 1010006987	- 3rd Party Payor Fee	154.76	901275
7/18/2024	HPHG LLC MEMOR PREM MemMedCtr PtLav 11312265	- Health Insurance Premium Payment	66,521.11	800554
7/18/2024	HPHG LLC port lava MemMedCtr PtLav 113122650	- Health Insurance Claim Payments	8,453.25	800555
7/18/2024	HPHG LLC PORT LAVA MemMedCtr PtLav 113122650	- Health Insurance Claim Payments	45,519.69	800556
7/18/2024	HPHG LLC PORT LAVA MemMedCtr PtLav 113122650	- Health Insurance Claim Payments	31,132.33	800557
7/17/2024	WIRE OUT HEALTHEQUITY	-Wageworks	6,213.61	800558
7/17/2024	PAY PLUS ACHTrans 000000029360852 1010006974	- 3rd Party Payor Fee	198.56	901276
7/16/2024	PAY PLUS ACHTrans 000000029213409 1010006960	- 3rd Party Payor Fee	18.48	901277
7/16/2024	MCKESSON DRUG AUTO ACH ACH06085203 910000129	- 340B Drug Program Expense	2,647.84	500622
7/15/2024	PAY PLUS ACHTrans 000000029026242 1010006947	- 3rd Party Payor Fee	74.60	901278
7/15/2024	TEXAS COUNTY DRS RECEIVABLE 0419 21000025671	- Retirement Funding	177,750.82	800559
7/15/2024	FDMS FDMS PYMT 052-1743548-000 4100012994009	- Credit Card Machine Lease Fee	80.06	901279
7/15/2024	FDMS FDMS PYMT 052-2100911-000 4100012994667	- Credit Card Machine Lease Fee	45.64	901280
7/15/2024	FDMS FDMS PYMT 052-1743547-000 4100012993585	- Credit Card Machine Lease Fee	40.03	901281
7/15/2024	FDMS FDMS PYMT 052-1737276-000 4100012993423	- Credit Card Machine Lease Fee	120.09	901282
			741,903.88	

Pay AOS
237.67 +
154.76 +
198.56 +
18.48 +
74.60 +
684.07 ◊
0.C
CC LeaseFee
80.06 +
45.64 +
40.03 +
120.09 +
~~285.82~~ ◊
0.C

684.07 +
285.82 +
969.89 ◊

741,903.88 +

Andrew De Los Santos
Memorial Medical Center

July 22, 2024

* Approved on 7.17.24 CC
** Approved on 7.03.24 CC
*** Approved on 7.10.24 CC

ELECTRONIC TRANSFERS FOR OPERATING ACC

Date	Descriptio	MMC Notes	Amount
			0.00

Andrew De Los Santos
Memorial Medical Center

July 22, 2024

969.89 ◊
0.00 ◊

APPROVED ON
JUL 22 2024
BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

AD allyree benefits

CHKNO	GRPNO	LOCNO	EMPNO	DEPNO	CLMYR	CLMNO	CLMSUF	CHKDT	AMT	CLMTP	PAYEE	PAYTO	VNDCD	CVGTP	FIRSTNAME	LASTNAME	CODE	VOID	FROMDT	THRUDT	PRVNO
2324	76351	1	1	0	2024	192001404	0	7/15/2024	$12,145.74	1	TRUESCRIPTS MANAGEMENT SERVICE LLC	P	517	0	OFFENSE	EMPLOYEE	PCS	F	6/17/2024	6/30/2024	464334244
2328	76351	3	49	0	2024	192000078	0	7/15/2024	$11.19	1	SINGLETON ASSOCIATES PA	P	181	0	[redacted]		XRAY	F	6/17/2024	6/17/2024	741680498
2329	76351	3	44	0	2024	190000557	0	7/15/2024	$20.37	1	CLINICAL PATHOLOGY LABS, INC	P	172	0	[redacted]		AB	F	6/28/2024	6/28/2024	742554159
2330	76351	3	51	0	2024	185001737	0	7/15/2024	$22.59	1	MELISSA A KANER ERWIN MD PA	P	177	0	[redacted]		OV	F	7/1/2024	7/1/2024	200802489
2331	76351	3	8	0	2024	192000045	0	7/15/2024	$65.89	1	PORT LAVACA CLINIC ASSOCIATES	P	177	0	[redacted]		OV	F	6/27/2024	6/27/2024	742605670
2332	76351	3	49	0	2024	187000042	0	7/15/2024	$66.31	1	GREATER HOUSTON INTERVENTIONAL	P	177	0	[redacted]		OV	F	6/27/2024	6/27/2024	202341076
2334	76351	3	44	0	2024	190000560	0	7/15/2024	$124.66	1	VICTORIA WOMENS CLINIC ASSOCIATES	P	172	0	[redacted]		AB	F	6/28/2024	6/28/2024	741831291
2335	76351	3	43	0	2024	185000654	0	7/15/2024	$139.63	1	SINGLETON ASSOCIATES PA	P	372	0	[redacted]		MRIO	F	6/20/2024	6/20/2024	741680498
2336	76351	3	36	0	2024	190000942	0	7/15/2024	$153.60	1	ESS OF PORT LAVACA LLC	P	189	0	[redacted]		ERO	F	6/18/2024	6/18/2024	815248556
2338	76351	3	43	0	2024	185001745	0	7/15/2024	$249.62	1	IRFAN LALANI MD PA	P	484	0	[redacted]		ODXS	F	6/28/2024	6/28/2024	261924416
2344	76360	2	19	1	2024	192000640	0	7/15/2024	$6.11	1	FRANK S PARMA MD	P	177	0	[redacted]		OV	F	5/29/2024	5/29/2024	742608003
2345	76360	2	36	0	2024	187000066	0	7/15/2024	$94.58	1	HEALTH AND WELLNESS SOLUTIONS PA	P	457	0	[redacted]		OVS	F	7/1/2024	7/1/2024	260406811
2347	76360	3	32	0	2024	185000390	0	7/15/2024	$5,482.16	1	DRISCOLL CHILDRENS HOSPITAL	P	481	0	[redacted]		OPDX	F	6/27/2024	6/27/2024	742577746
2348	76360	3	26	1	2024	185000652	0	7/15/2024	$13.79	1	SINGLETON ASSOCIATES PA	P	181	0	[redacted]		RAD	F	6/20/2024	6/20/2024	741680498
2349	76360	3	10	1	2024	193000017	0	7/15/2024	$16.03	1	VIP CARE SERVICES LLC	P	503	0	[redacted]		AUDT	F	5/29/2024	5/29/2024	271837628
2350	76360	3	69	0	2024	192001174	0	7/15/2024	$19.10	1	NOE R. OLVERA, MD, PA	P	457	0	[redacted]		OVS	F	5/1/2024	5/1/2024	262712018
2352	76360	3	94	0	2024	190000555	0	7/15/2024	$59.94	1	AYO ADU, MD PLLC	P	177	0	[redacted]		OV	F	7/3/2024	7/3/2024	273335355
2355	76360	3	28	0	2024	192000130	0	7/15/2024	$83.57	1	SINGLETON ASSOCIATES PA	P	172	0	[redacted]		AB	F	6/25/2024	6/25/2024	741680498
2356	76360	3	105	0	2024	192000539	0	7/15/2024	$84.22	1	REGIONAL EMPLOYEE ASSISTANCE PROGRAM	P	430	0	[redacted]		SF	F	6/27/2024	6/27/2024	760423386
2357	76360	3	70	0	2024	185000639	0	7/15/2024	$90.47	1	SINGLETON ASSOCIATES PA	P	321	0	[redacted]		MRIO	F	6/19/2024	6/19/2024	741680498
2358	76360	3	47	0	2024	193000018	0	7/15/2024	$129.99	1	VIP CARE SERVICES LLC	P	503	0	[redacted]		AUDT	F	3/11/2024	3/11/2024	271837628
2359	76360	3	37	6	2024	185001746	0	7/15/2024	$130.00	1	CRESCENT VIEW MEDICAL CLINICS PA	P	172	0	[redacted]		AB	F	6/28/2024	6/28/2024	452547088
2360	76360	3	32	6	2024	185000640	0	7/15/2024	$132.37	1	CHILDRENS PHYSICIAN SERVICES OF SOUTH	P	457	0	[redacted]		OVS	F	6/27/2024	6/27/2024	742620408
2362	76360	3	20	0	2024	185000582	0	7/15/2024	$213.60	1	SINGLETON ASSOCIATES PA	P	324	0	[redacted]		CAT	F	6/20/2024	6/20/2024	741680498
2363	76360	3	32	6	2024	190000225	0	7/15/2024	$272.44	1	CITIZENS MEDICAL CENTER COUNTY OF	P	382	0	[redacted]		IBR	F	6/28/2024	6/28/2024	741698143
2364	76360	3	59	1	2024	185000046	0	7/15/2024	$383.61	1	OBGYN AFFILIATES	P	457	0	[redacted]		OVS	F	6/24/2024	6/24/2024	811520625
2370	76360	3	61	0	2024	192000336	0	7/15/2024	$819.47	1	TEXAS ONCOLOGY PA	P	317	0	[redacted]		OPES	F	6/20/2024	6/20/2024	752131429
2376	76370	3	5	0	2024	193000015	0	7/15/2024	$1.87	1	VIP CARE SERVICES LLC	P	503	0	[redacted]		AUDT	F	6/10/2024	6/10/2024	271837628
									$41,014.08												

Andrew De Los Santos
7/22/2024

APPROVED ON

JUL 22 2024

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

RECEIVED BY THE
COUNTY AUDITOR ON

JUL 18 2024

CALHOUN COUNTY, TEXAS

07/18/2024
13:39

MEMORIAL MEDICAL CENTER
AP Open Invoice List
Due Dates Through: 08/10/2024

0
ap_open_invoice.template

Vendor# Vendor Name
Class Pay Code

11832 BROADMOOR AT CREEKSIDE PARK

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
070524B		07/05/202	07/05/202	08/10/202			204.00	0.00	0.00	204.00
ins. pmt. app. unto MMC opt in error										
070124		07/17/202	07/01/202	08/10/202			154.52	0.00	0.00	154.52
070124A		07/17/202	07/01/202	08/10/202			121.57	0.00	0.00	121.57
070524A		07/17/202	07/05/202	08/10/202			125.25	0.00	0.00	125.25

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	11832	BROADMOOR AT CREEKSIDE PARK	605.34	0.00	0.00	605.34

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	605.34	0.00	0.00	605.34

APPROVED ON

JUL 18 2024

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

07/18/2024
13:40

RECEIVED BY THE COUNTY AUDITOR ON
JUL 18 2024
CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER
AP Open Invoice List
Due Dates Through: 08/10/2024

0
ap_open_invoice.template

Vendor# Vendor Name Class Pay Code
11824 THE CRESCENT

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
070324		07/05/202	07/03/202	08/10/202			1,020.00	0.00	0.00	1,020.00
	INS. PMT. dep. into MMC OPt. in error									
070124		07/17/202	07/01/202	08/10/202			197.51	0.00	0.00	197.51
070524		07/17/202	07/15/202	08/10/202			13,000.00	0.00	0.00	13,000.00

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	11824	THE CRESCENT	14,217.51	0.00	0.00	14,217.51

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	14,217.51	0.00	0.00	14,217.51

APPROVED ON
JUL 18 2024
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

RECEIVED BY THE
COUNTY AUDITOR ON

JUL 1 8 2024

07/18/2024
13:40

MEMORIAL MEDICAL CENTER
AP Open Invoice List
Due Dates Through: 08/10/2024

0
ap_open_invoice.template

Vendor# Vendor NamCALHOUN COUNTY, TEXAS Class Pay Code

11836 GOLDENCREEK HEALTHCARE

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
070224		07/17/202	07/02/202	08/10/202			746.16	0.00	0.00	746.16
	Ins. pmt. dep into MMC act. in error									
070224A		07/17/202	07/02/202	08/10/202			5,916.00	0.00	0.00	5,916.00
070824		07/17/202	07/08/202	08/10/202			1,502.05	0.00	0.00	1,502.05
070924A		07/17/202	07/09/202	08/10/202			6,540.58	0.00	0.00	6,540.58
070924		07/17/202	07/09/202	08/10/202			26,631.56	0.00	0.00	26,631.56
0710024		07/17/202	07/10/202	08/10/202			6,938.00	0.00	0.00	6,938.00
071024		07/17/202	07/10/202	08/10/202			4,860.92	0.00	0.00	4,860.92

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	11836	GOLDENCREEK HEALTHCARE	53,135.27	0.00	0.00	53,135.27

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	53,135.27	0.00	0.00	53,135.27

APPROVED ON

JUL 1 8 2024

BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

RECEIVED BY THE
COUNTY AUDITOR ON

JUL 18 2024

07/18/2024
13:41

MEMORIAL MEDICAL CENTER
AP Open Invoice List
Due Dates Through: 08/10/2024

0
ap_open_invoice.template

CALHOUN COUNTY, TEXAS

Vendor#	Vendor Name					Class	Pay Code					
13004	TUSCANY VILLAGE											
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net	
	070824		07/17/202	07/08/202	08/10/202			3,300.00	0.00	0.00	3,300.00	

ins pmt. aep. into mmcope. in error

	Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
		13004	TUSCANY VILLAGE	3,300.00	0.00	0.00	3,300.00

Report Summary

	Gross	Discount	No-Pay	Net
Grand Totals:	3,300.00	0.00	0.00	3,300.00

APPROVED ON

JUL 18 2024

BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

RECEIVED BY THE
COUNTY AUDITOR ON

JUL 1 8 2024

CALHOUN COUNTY, TEXAS

07/18/2024
13:41

MEMORIAL MEDICAL CENTER
AP Open Invoice List
Due Dates Through: 08/10/2024

0
ap_open_invoice.template

Vendor# Vendor Name Class Pay Code
12792 BETHANY SENIOR LIVING

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check Dt	Pay	Gross	Discount	No-Pay	Net
070124A		07/05/202	07/01/202	08/10/202			24,259.12	0.00	0.00	24,259.12
	ins pmt dep into MMC op in error									
070124		07/05/202	07/01/202	08/10/202			3,003.56	0.00	0.00	3,003.56
070224		07/05/202	07/02/202	08/10/202			6,120.00	0.00	0.00	6,120.00
070224A		07/05/202	07/02/202	08/10/202			13,781.05	0.00	0.00	13,781.05
070324		07/05/202	07/03/202	08/10/202			9,832.65	0.00	0.00	9,832.65
070524C		07/05/202	07/05/202	08/10/202			102.50	0.00	0.00	102.50
070824		07/05/202	07/08/202	08/10/202			4,422.55	0.00	0.00	4,422.55
070924A		07/05/202	07/09/202	08/10/202			34,570.36	0.00	0.00	34,570.36
070924		07/05/202	07/09/202	08/10/202			15,684.06	0.00	0.00	15,684.06
071024		07/05/202	07/10/202	08/10/202			3,468.00	0.00	0.00	3,468.00

Vendor Totals: Number	Name	Gross	Discount	No-Pay	Net
12792	BETHANY SENIOR LIVING	115,243.85	0.00	0.00	115,243.85

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	115,243.85	0.00	0.00	115,243.85

APPROVED ON

JUL 1 8 2024

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Memorial Medical Center
Nursing Home UPL
Weekly Centex Transfer
Prosperity Accounts
7/22/2024

Nursing Home	Account	Previous Beginning Balance	Transfer-Out	ACH Transfer-In	Pending Deposits		Today's Beginning Balance	Amount to Be Transferred to Nursing Home
[redacted]	--	179,564.76	167,113.87	83,254.62			95,705.51	79,058.29
						Bank Balance	95,705.51	
						Variance	-	
						Leave in Balance	100.00	
Routing Information for Ashford Gardens:								
						Molina May	12,410.83	
						Wellpoint May	4,116.39	
Ashford Health Care Center Ltd Co								
JP Morgan Chase Bank								
						Adjust Balance/Transfer Amt	79,058.29	
[redacted]		254,487.75	249,803.40	93,398.77		-	98,083.12	91,932.21
						Bank Balance	98,083.12	
						Variance	-	
						Leave in Balance	100.00	
						Molina May	4,554.35	
						Wellpoint May	1,466.56	
						Adjust Balance/Transfer Amt	91,932.21	
[redacted]		254,035.51	272,507.92	353,145.22			334,672.81	330,055.94
						Bank Balance	334,672.81	
						Variance	-	
						Leave in Balance	100.00	
						Molina May	3,419.45	
						Wellpoint May	1,097.42	
						Adjust Balance/Transfer Amt	330,055.94	
[redacted]		43,953.99	39,983.55	45,436.39			49,406.83	44,184.23
						Bank Balance	49,406.83	
						Variance	-	
						Leave in Balance	100.00	
						Molina May	3,870.44	
						Wellpoint May	1,252.16	
						Adjust Balance/Transfer Amt	44,184.23	
[redacted]		178,931.79	175,214.58	103,328.14			107,045.35	102,086.43
						Bank Balance	107,045.35	
						Variance	-	
						Leave in Balance	100.00	
						Molina May	3,703.09	
						Wellpoint May	1,155.83	
T Bend / Broadmoor								
						Adjust Balance/Transfer Amt	102,086.43	
TOTAL TRANSFERS								647,317.10

79,058.29 +
91,932.21 +
330,055.94 +
44,184.23 +
102,086.43 +
647,317.10 ◇

APPROVED ON
JUL 22 2024
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Approved: Andrew De Los Santos
Andrew De Los Santos 7/22/2024

Note: Only balances of over $5,000 will be transferred to the nursing home
Note 2: Each account has a base balance of $100 that MMC deposited to open account

L:\NH Weekly Transfers\NH UPL Transfer Summary\2024\NH UPL Transfer Summary 7.22.24

[redacted]	Transfer-Out	Transfer-In	MMC PORTION QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP TI	NH PORTION
7/19/2024 WELLPOINT CO AP E-PAYMENT EE52832813 1110000	-	27,226.35	21,345.80	5,880.55			23,109.97	4,116.39
7/18/2024 MANAGEANDNET1718 MNS PMNT 000000000000093 41	-	5,355.00					-	5,355.00
7/18/2024 HEALTH HUMAN SVC HCCLAIMPMT 17460034113005 2	-	20,505.45					-	20,505.45
7/17/2024 WIRE OUT ASHFORD HEALTH CARE CENTER LTD	167,033.93	-					-	-
7/17/2024 HNB - ECHO HCCLAIMPMT 746003411 440000269920	-	2,968.60					-	2,968.60
7/16/2024 HNB - ECHO HCCLAIMPMT 746003411 440000227906	-	393.80					-	393.80
7/15/2024 Enhanced Analysis Charge	79.94	-					-	-
7/15/2024 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	26,805.42					-	26,805.42
	167,113.87	83,254.62	21,345.80	5,880.55	-	-	23,109.97	60,144.66

[redacted]	Transfer-Out	Transfer-In	MMC PORTION QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP TI	NH PORTION
7/19/2024 HNB - ECHO HCCLAIMPMT 746003411 440000251752	-	307.20					-	307.20
7/19/2024 WELLPOINT CO AP E-PAYMENT EE52832816 1110000	-	9,988.79	7,893.70	2,095.09			8,522.23	1,466.56
7/19/2024 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	2,877.86					-	2,877.86
7/19/2024 NOVITAS SOLUTION HCCLAIMPMT 676357 420000166	-	7,675.92					-	7,675.92
7/19/2024 HUMANA CHA OISB HCCLAIMPMT 52750497 42000014	-	705.49					-	705.49
7/19/2024 HEALTH HUMAN SVC HCCLAIMPMT 17460034113004 2	-	44.49					-	44.49
7/19/2024 AARP Supplementa HCCLAIMPMT 746003411 124384	-	1,428.00					-	1,428.00
7/18/2024 HNB - ECHO HCCLAIMPMT 746003411 440000214199	-	7,919.21					-	7,919.21
7/18/2024 HNB - ECHO HCCLAIMPMT 746003411 440000214399	-	9,100.72					-	9,100.72
7/18/2024 NOVITAS SOLUTION HCCLAIMPMT 676357 420000135	-	35,037.92					-	35,037.92
7/17/2024 WIRE OUT CANTEX HEALTH CARE CENTERS III	249,803.40	-					-	-
7/15/2024 HNB - ECHO HCCLAIMPMT 746003411 440000227906	-	18,313.17					-	18,313.17
	249,803.40	93,398.77	7,893.70	2,095.09	-	-	8,522.23	84,876.54

[redacted]	Transfer-Out	Transfer-In	MMC PORTION QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP TI	NH PORTION
7/19/2024 HNB - ECHO HCCLAIMPMT 746003411 440000251544	-	9,056.12					-	9,056.12
7/19/2024 HNB - ECHO HCCLAIMPMT 746003411 440000251537	-	8,438.66					-	8,438.66
7/19/2024 DEVOTED HEALTH P HCCLAIMPMT 21000021867823	-	870.38					-	870.38
7/19/2024 WELLPOINT CO AP E-PAYMENT EE52832815 1110000	-	7,454.24	5,886.50	1,567.74			6,356.82	1,097.42
7/19/2024 HEALTH HUMAN SVC HCCLAIMPMT 17460034113008 2	-	110.42					-	110.42
7/18/2024 Check 352	9,394.00	-					-	-
7/18/2024 Check 351	12,597.66	-					-	-
7/18/2024 Deposit	-	6,324.00					-	6,324.00
7/18/2024 HNB - ECHO HCCLAIMPMT 746003411 440000214399	-	6,429.46					-	6,429.46
7/18/2024 UnitedHealthcare HCCLAIMPMT 746003411 124384	-	15,170.00					-	15,170.00
7/18/2024 NOVITAS SOLUTION HCCLAIMPMT 676323 420000135	-	211,186.60					-	211,186.60
7/18/2024 DEVOTED HEALTH P HCCLAIMPMT 21000027616927	-	500.00					-	500.00
7/17/2024 WIRE OUT CANTEX HEALTH CARE CENTERS III	250,516.06	-					-	-
7/17/2024 HNB - ECHO HCCLAIMPMT 746003411 440000269920	-	4,583.04					-	4,583.04
7/17/2024 DEVOTED HEALTH P HCCLAIMPMT 21000024386183	-	14,857.64					-	14,857.64
7/17/2024 DEVOTED HEALTH P HCCLAIMPMT 21000024386165	-	650.00					-	650.00
7/17/2024 DEVOTED HEALTH P HCCLAIMPMT 21000024386267	-	2,250.00					-	2,250.00
7/17/2024 DEVOTED HEALTH P HCCLAIMPMT 21000024386205	-	6,750.00					-	6,750.00
7/17/2024 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	1,134.63					-	1,134.63
7/17/2024 NOVITAS SOLUTION HCCLAIMPMT 676323 420000122	-	3,552.05					-	3,552.05
7/16/2024 DEVOTED HEALTH P HCCLAIMPMT 21000022696038	-	17,823.35					-	17,823.35
7/16/2024 DEVOTED HEALTH P HCCLAIMPMT 21000022694996	-	600.00					-	600.00
7/16/2024 DEVOTED HEALTH P HCCLAIMPMT 21000022696346	-	7,488.00					-	7,488.00
7/16/2024 DEVOTED HEALTH P HCCLAIMPMT 21000022695652	-	5,906.00					-	5,906.00
7/15/2024 HNB - ECHO HCCLAIMPMT 746003411 440000272779	-	1,632.85					-	1,632.85
7/15/2024 HNB - ECHO HCCLAIMPMT 746003411 440000272779	-	3,704.78					-	3,704.78
7/15/2024 DEVOTED HEALTH P HCCLAIMPMT 21000026944979	-	6,500.00					-	6,500.00
7/15/2024 DEVOTED HEALTH P HCCLAIMPMT 21000026943992	-	5,880.00					-	5,880.00
7/15/2024 HEALTH HUMAN SVC HCCLAIMPMT 17460034113008 2	-	4,293.00					-	4,293.00
	272,507.92	353,145.22	5,886.50	1,567.74	-	-	6,356.82	346,788.40

[redacted]	Transfer-Out	Transfer-In	MMC PORTION QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP TI	NH PORTION
7/19/2024 HNB - ECHO HCCLAIMPMT 746003411 440000251544	-	8,463.83					-	8,463.83
7/19/2024 WELLPOINT CO AP E-PAYMENT EE52832612 1110000	-	8,447.30	6,658.50	1,788.80			7,195.14	1,252.16
7/18/2024 HNB - ECHO HCCLAIMPMT 746003411 440000214399	-	8,903.77					-	8,903.77
7/18/2024 NOVITAS SOLUTION HCCLAIMPMT 675443 420000135	-	19,621.49					-	19,621.49
7/17/2024 WIRE OUT CANTEX HEALTH CARE CENTERS III	39,983.55	-					-	-
	39,983.55	45,436.39	6,658.50	1,788.80	-	-	7,195.14	38,241.25

[redacted]	Transfer-Out	Transfer-In	MMC PORTION QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP TI	NH PORTION
7/19/2024 MANAGEANDNET1718 MNS PMNT 000000000002482 41	-	2,925.00					-	2,925.00
7/19/2024 HNB - ECHO HCCLAIMPMT 746003411 440000252201	-	1,599.52					-	1,599.52
7/19/2024 HNB - ECHO HCCLAIMPMT 746003411 440000252109	-	599.82					-	599.82
7/19/2024 HNB - ECHO HCCLAIMPMT 746003411 440000251751	-	2,291.52					-	2,291.52
7/19/2024 WELLPOINT CO AP E-PAYMENT EE52832814 1110000	-	8,039.49	6,388.30	1,651.19			6,883.66	1,155.83
7/19/2024 HEALTH HUMAN SVC HCCLAIMPMT 17460034113007 2	-	68.34					-	68.34
7/18/2024 MANAGEANDNET1718 MNS PMNT 000000000002482 41	-	203.00					-	203.00
7/18/2024 HNB - ECHO HCCLAIMPMT 746003411 440000214399	-	41,458.23					-	41,458.23
7/18/2024 NOVITAS SOLUTION HCCLAIMPMT 676310 420000135	-	23,259.00					-	23,259.00
7/17/2024 WIRE OUT CANTEX HEALTH CARE CENTERS III	175,128.70	-					-	-
7/17/2024 UnitedHealthcare HCCLAIMPMT 746003411 124384	-	2,250.00					-	2,250.00
7/17/2024 NOVITAS SOLUTION HCCLAIMPMT 676310 420000122	-	2,076.74					-	2,076.74
7/17/2024 AARP Supplementa HCCLAIMPMT 746003411 124384	-	5,814.00					-	5,814.00
7/16/2024 HUMANA INS CO HCCLAIMPMT 52434437 8300005460	-	2,908.00					-	2,908.00
7/16/2024 HUMANA INS CO HCCLAIMPMT 52434436 8300005460	-	1,860.00					-	1,860.00
7/16/2024 HEALTH HUMAN SVC HCCLAIMPMT 17460034113007 2	-	2,652.00					-	2,652.00
7/15/2024 Enhanced Analysis Charge	85.88	-					-	-
7/15/2024 HEALTH HUMAN SVC HCCLAIMPMT 17460034113007 2	-	2,467.48					-	2,467.48
7/15/2024 AARP Supplementa HCCLAIMPMT 746003411 124384	-	2,856.00					-	2,856.00
	175,214.58	103,328.14	6,388.30	1,651.19	-	-	6,883.66	96,444.48

	Transfer-Out	Transfer-In	QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP TI	NH PORTION
TOTALS	904,623.32	678,563.14	48,172.80	12,983.37	-	-	52,067.81	626,495.33

Balances Overview

Account Name				
*4357 MEMORIAL MEDICAL - OPERATING	$2,346,675.53	$2,557,076.52	$2,346,675.53	$2,764,609.90
*4365 MMC - CLINIC SERIES 2014	$545.22	$545.22	$545.22	$545.22
*4373 MMC - PRIVATE WAIVER CLEARING	$438.92	$438.92	$438.92	$438.92
*4381 MEMORIAL MEDICAL / NH ASHFORD	$95,705.51	$120,824.65	$95,705.51	$68,479.16
*4403 MEMORIAL MEDICAL / NH BROADMOOR	$98,083.12	$100,378.15	$98,083.12	$75,055.37
*4411 MEMORIAL MEDICAL / NH CRESCENT	$334,672.81	$380,472.72	$334,672.81	$308,742.99
*4438 MEMORIAL MEDICAL / SOLERA @ WEST HOUSTON	$107,045.35	$250,756.06	$107,045.35	$91,521.66
*4446 MEMORIAL MEDICAL / NH FORT BEND	$49,406.83	$81,593.57	$49,406.83	$32,495.70
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	$51,606.43	$64,237.86	$51,606.43	$16,135.67
*4551 CAL CO INDIGENT HEALTHCARE	$9,743.32	$9,743.32	$9,743.32	$9,743.32
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	$2,190.15	$3,061.03	$2,190.15	$2,190.15
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	$2,757.67	$2,757.67	$2,757.67	$2,757.67
*5506 MMC -NH BETHANY SENIOR LIVING	$32,728.86	$136,998.73	$32,728.86	$6,375.34
*3407 MMC -NH TUSCANY VILLAGE	$65,502.17	$65,502.17	$65,502.17	$49,517.88
*3660 MMC -BETHANY SR LIVING - DACA	$100.00	$100.00	$100.00	$100.00
*2998 MMC -MONEY MARKET FUND	$5,034.00	$5,034.00	$5,034.00	$5,034.00
Total Balance	**$3,202,235.89**	**$3,779,520.59**	**$3,202,235.89**	**$3,433,742.95**

Memorial Medical Center
Nursing Home UPL
Weekly Nexion Transfer
Prosperity Accounts
7/22/2024

Nursing Home	Account Number	Previous Beginning Balance	Transfer-Out	Transfer-In	Pending Deposits		Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Golden Creek [illegible]		121,585.86	121,485.86	51,506.43		-	51,606.43	48,177.21
						Bank Balance	51,606.43	
						Variance	-	
						Leave in Balance	100.00	
						Superior May	3,329.22	

APPROVED ON

JUL 22 2024

BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

Routing Information for Golden Creek:
Nexion Health at Golden Creek
Wells Fargo Bank, N.A.

Adjust Balance/Transfer Amt 48,177.21

Note: Only balances of over $5,000 will be transferred to the nursing home.
Note 2: Each account has a base balance of $100 that MMC deposited to open account.

Approved: Andrew De Los Santos
Andrew De Los Santos 7/22/2024

				MMC PORTION				
[redacted]	Transfer-Out	Transfer-In	QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4 &Lapse	QIPP T1	NH PORTION
7/19/2024 HNB - ECHO HCCLAIMPMT 746003411 440000251544	-	6,256.18					-	6,256.18
7/19/2024 HEALTH HUMAN SVC HCCLAIMPMT 17460034113011 2	-	3,544.26					-	3,544.26
7/19/2024 Centene Manageme ACH 008765433514 1110000275	-	25,670.32	20,121.62	5,548.70			22,341.10	3,329.22
7/18/2024 Deposit	-	8,748.14					-	8,748.14
7/18/2024 HNB - ECHO HCCLAIMPMT 746003411 440000214399	-	3,600.30					-	3,600.30
7/17/2024 WIRE OUT NEXION HEALTH d/b/a GOLDEN CREEK HC	121,485.86	-					-	-
7/16/2024 HEALTH HUMAN SVC HCCLAIMPMT 17460034113011 2	-	1,642.23					-	1,642.23
7/15/2024 TSYS/TRANSFIRST CR CD DEP 543684555876917 91	-	2,045.00					-	2,045.00
	121,485.86	51,506.43	20,121.62	5,548.70	-	-	22,341.10	29,165.33

Balances Overview

Account Name				
*4357 MEMORIAL MEDICAL - OPERATING	$2,346,675.53	$2,557,076.52	$2,346,675.53	$2,764,609.90
*4365 MMC - CLINIC SERIES 2014	$545.22	$545.22	$545.22	$545.22
*4373 MMC - PRIVATE WAIVER CLEARING	$438.92	$438.92	$438.92	$438.92
*4381 MEMORIAL MEDICAL / NH ASHFORD	$95,705.51	$120,824.65	$95,705.51	$68,479.16
*4403 MEMORIAL MEDICAL / NH BROADMOOR	$98,083.12	$100,378.15	$98,083.12	$75,055.37
*4411 MEMORIAL MEDICAL / NH CRESCENT	$334,672.81	$380,472.72	$334,672.81	$308,742.99
*4438 MEMORIAL MEDICAL / SOLERA @ WEST HOUSTON	$107,045.35	$250,756.06	$107,045.35	$91,521.66
*4446 MEMORIAL MEDICAL / NH FORT BEND	$49,406.83	$81,593.57	$49,406.83	$32,495.70
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	$51,606.43	$64,237.86	$51,606.43	$16,135.67
*4551 CAL CO INDIGENT HEALTHCARE	$9,743.32	$9,743.32	$9,743.32	$9,743.32
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	$2,190.15	$3,061.03	$2,190.15	$2,190.15
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	$2,757.67	$2,757.67	$2,757.67	$2,757.67
*5506 MMC -NH BETHANY SENIOR LIVING	$32,728.86	$136,998.73	$32,728.86	$6,375.34
*3407 MMC -NH TUSCANY VILLAGE	$65,502.17	$65,502.17	$65,502.17	$49,517.88
*3660 MMC -BETHANY SR LIVING - DACA	$100.00	$100.00	$100.00	$100.00
*2998 MMC -MONEY MARKET FUND	$5,034.00	$5,034.00	$5,034.00	$5,034.00
Total Balance	**$3,202,235.89**	**$3,779,520.59**	**$3,202,235.89**	**$3,433,742.95**

Memorial Medical Center
Nursing Home UPL
Weekly HMG Transfer
Prosperity Accounts
7/22/2024

Nursing Home	Account Number	Previous Beginning Balance	Transfer-Out	Transfer-In	Cks Cleared	Pending Deposits		Today's Beginning Balance	Amount to Be Transferred to Nursing Home
[redacted]		1,958.93	-	231.22				2,190.15	No transfer
							Bank Balance	2,190.15	
							Variance	-	
							Leave in Balance	100.00	
							Adjust Balance/Transfer Amt	2,090.15	

Nursing Home	Account Number	Previous Beginning Balance	Transfer-Out	Transfer-In	Cks Cleared	Pending Deposits		Today's Beginning Balance	Amount to Be Transferred to Nursing Home
[redacted]		11,028.00	10,928.00	2,657.67		-		2,757.67	-
							Bank Balance	2,757.67	
							Variance	-	
							Leave in Balance	100.00	
							Adjust Balance/Transfer Amt	2,657.67	
							TOTAL TRANSFERS	4,747.82	

Routing Information for Gulf Pointe Plaza:

APPROVED ON
JUL 22 2024
BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

Note: Only balances of over $5,000 will be transferred to the nursing home.
Note 2: Each account has a base balance of $100 that MMC deposited to open account.

Approved: Andrew De Los Santos
Andrew De Los Santos
7/22/2024

[redacted]

	Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
			QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4 &Lapse	QIPP TI	
7/18/2024 HNB - ECHO HCCLAIMPMT 746003411 440000214094	-	152.81					-	152.81
7/16/2024 PNC-ECHO HCCLAIMPMT 746003411 41000127221405	-	78.41					-	78.41
							-	-
	-	231.22	-	-	-	-	-	231.22

[redacted]

	Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
			QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4 &Lapse	QIPP TI	
7/17/2024 WIRE OUT HMG Rockport SNF, LP - Commerical	10,928.00	-					-	-
7/15/2024 MERCHANT BANKCD DEPOSIT 496478538889 9100001	-	2,657.67					-	2,657.67
							-	-
	10,928.00	2,657.67	-	-	-	-	-	2,657.67
	10,928.00	2,888.89	-	-	-	-	-	2,888.89

Balances Overview

Account Name				
*4357 MEMORIAL MEDICAL - OPERATING	$2,346,675.53	$2,557,076.52	$2,346,675.53	$2,764,609.90
*4365 MMC - CLINIC SERIES 2014	$545.22	$545.22	$545.22	$545.22
*4373 MMC - PRIVATE WAIVER CLEARING	$438.92	$438.92	$438.92	$438.92
*4381 MEMORIAL MEDICAL / NH ASHFORD	$95,705.51	$120,824.65	$95,705.51	$68,479.16
*4403 MEMORIAL MEDICAL / NH BROADMOOR	$98,083.12	$100,378.15	$98,083.12	$75,055.37
*4411 MEMORIAL MEDICAL / NH CRESCENT	$334,672.81	$380,472.72	$334,672.81	$308,742.99
*4438 MEMORIAL MEDICAL / SOLERA @ WEST HOUSTON	$107,045.35	$250,756.06	$107,045.35	$91,521.66
*4446 MEMORIAL MEDICAL / NH FORT BEND	$49,406.83	$81,593.57	$49,406.83	$32,495.70
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	$51,606.43	$64,237.86	$51,606.43	$16,135.67
*4551 CAL CO INDIGENT HEALTHCARE	$9,743.32	$9,743.32	$9,743.32	$9,743.32
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	$2,190.15	$3,061.03	$2,190.15	$2,190.15
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	$2,757.67	$2,757.67	$2,757.67	$2,757.67
*5506 MMC -NH BETHANY SENIOR LIVING	$32,728.86	$136,998.73	$32,728.86	$6,375.34
*3407 MMC -NH TUSCANY VILLAGE	$65,502.17	$65,502.17	$65,502.17	$49,517.88
*3660 MMC -BETHANY SR LIVING - DACA	$100.00	$100.00	$100.00	$100.00
*2998 MMC -MONEY MARKET FUND	$5,034.00	$5,034.00	$5,034.00	$5,034.00
Total Balance	**$3,202,235.89**	**$3,779,520.59**	**$3,202,235.89**	**$3,433,742.95**

Memorial Medical Center
Nursing Home UPL
Weekly Tuscany Transfer
Prosperity Accounts
7/22/2024

Nursing Home	Account Number	Previous Beginning Balance	Transfer-Out	Transfer-In	Cks Cleared	Pending Deposits		Today's Beginning Balance	Amount to Be Transferred to Nursing Home
[redacted]		189,561.23	181,766.13	57,707.07	-	-	-	65,502.17	56,026.02

Bank Balance	65,502.17
Variance	-
Leave in Balance	100.00
Molina May	7,695.10
Wellpoint May	1,681.05
Adjust Balance/Transfer Amt	56,026.02

APPROVED ON

JUL 22 2024

BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

Note: Only balances of over $5,000 will be transferred to the nursing home.
Note 2: Each account has a base balance of $100 that MMC deposited to open account.

Approved: Andrew D. Los Santos
Andrew De Los Santos
7/22/2024

[redacted]	Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
			QIPP/Comp 1	QIPP/Comp 2	QIPP/Comp 3	QIPP/Comp 4&Lapse	QIPP TI	
7/19/2024 WELLPOINT CO AP E-PAYMENT EE52832617 1110000	-	15,984.29	12,622.20	3,362.09			14,303.25	1,681.05
7/18/2024 Deposit	-	9,394.00					-	9,394.00
7/18/2024 Deposit	-	12,597.86					-	12,597.86
7/17/2024 WIRE OUT VILLAGE POST ACUTE HEALTH SERVICE	181,766.13	-					-	-
7/17/2024 NOVITAS SOLUTION HCCLAIMPMT 676201 420000122	-	9,654.92					-	9,654.92
7/16/2024 Deposit	-	10,076.00					-	10,076.00
	181,766.13	57,707.07	12,622.20	3,362.09	-	-	14,303.25	43,403.83

Balances Overview

Account Name				
*4357 MEMORIAL MEDICAL - OPERATING	$2,346,675.53	$2,557,076.52	$2,346,675.53	$2,764,609.90
*4365 MMC - CLINIC SERIES 2014	$545.22	$545.22	$545.22	$545.22
*4373 MMC - PRIVATE WAIVER CLEARING	$438.92	$438.92	$438.92	$438.92
*4381 MEMORIAL MEDICAL / NH ASHFORD	$95,705.51	$120,824.65	$95,705.51	$68,479.16
*4403 MEMORIAL MEDICAL / NH BROADMOOR	$98,083.12	$100,378.15	$98,083.12	$75,056.37
*4411 MEMORIAL MEDICAL / NH CRESCENT	$334,672.81	$380,472.72	$334,672.81	$308,742.99
*4438 MEMORIAL MEDICAL / SOLERA @ WEST HOUSTON	$107,045.35	$250,756.06	$107,045.35	$91,521.66
*4446 MEMORIAL MEDICAL / NH FORT BEND	$49,406.83	$81,593.57	$49,406.83	$32,495.70
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	$51,606.43	$64,237.86	$51,606.43	$16,135.67
*4551 CAL CO INDIGENT HEALTHCARE	$9,743.32	$9,743.32	$9,743.32	$9,743.32
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	$2,190.15	$3,061.03	$2,190.15	$2,190.15
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	$2,757.67	$2,757.67	$2,757.67	$2,757.67
*5506 MMC -NH BETHANY SENIOR LIVING	$32,728.86	$136,998.73	$32,728.86	$6,375.34
*3407 MMC -NH TUSCANY VILLAGE	$65,502.17	$65,502.17	$65,502.17	$49,517.88
*3660 MMC -BETHANY SR LIVING - DACA	$100.00	$100.00	$100.00	$100.00
*2998 MMC -MONEY MARKET FUND	$5,034.00	$5,034.00	$5,034.00	$5,034.00
Total Balance	**$3,202,235.89**	**$3,779,520.59**	**$3,202,235.89**	**$3,433,742.95**

Memorial Medical Center
Nursing Home UPL
Weekly HSLTransfer
Prosperity Accounts
7/22/2024

Nursing Home	Account Number	Previous Beginning Balance	Transfer-Out	Transfer-In	Cks Cleared	Pending Medicare Repayment		Today's Beginning Balance	Amount to Be Transferred to Nursing Home
[redacted]		67,049.37	66,949.17	32,628.86			-	32,728.86	29,034.96
							Bank Balance	32,728.86	
							Variance	-	
							Leave in Balance	100.00	
							Superior May	3,593.90	

APPROVED ON

JUL 22 2024

BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

Note: Only balances of over $5,000 will be transferred to the nursing home.
Note 2: Each account has a base balance of $100 that MMC deposited to open account.

Adjust Balance/Transfer Amt 29,034.96

Approved: Andrew De Los Santos
Andrew De Los Santos 7/22/2024

I:\NH Weekly Transfers\NH UPL Transfer Summary\2024\NH UPL Transfer Summary 7.22.24

[illegible]	Transfer-Out	Transfer-In	MMC PORTION QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP TI	NN PORTION
7/19/2024 HOSPICE OF SOUTH Payments NF 113122650023362	-	791.03					-	791.03
7/19/2024 Centene Manageme ACH 008765413514 1110000275	-	25,562.49	20,033.42	5,529.07			21,968.59	3,593.90
7/18/2024 HEALTH HUMAN SVC HCCLAIMPMT 17460034113016 2	-	1,132.25					-	1,132.25
7/17/2024 WIRE OUT PORT LAVACA NH, LLC	66,949.37	-					-	-
7/17/2024 NDC SWEEP FAC K236 31316960253275 SWEEP FR	-	3,322.23					-	3,322.23
7/16/2024 NOVITAS SOLUTION HCCLAIMPMT 676481 420000184	-	1,820.86					-	1,820.86
	66,949.37	32,628.86	20,033.42	5,529.07	-	-	21,968.59	10,660.27

Balances Overview

Account Name				
*4357 MEMORIAL MEDICAL - OPERATING	$2,346,675.53	$2,557,076.52	$2,346,675.53	$2,764,609.90
*4365 MMC - CLINIC SERIES 2014	$545.22	$545.22	$545.22	$545.22
*4373 MMC - PRIVATE WAIVER CLEARING	$438.92	$438.92	$438.92	$438.92
*4381 MEMORIAL MEDICAL / NH ASHFORD	$95,705.51	$120,824.65	$95,705.51	$68,479.16
*4403 MEMORIAL MEDICAL / NH BROADMOOR	$98,083.12	$100,378.15	$98,083.12	$75,055.37
*4411 MEMORIAL MEDICAL / NH CRESCENT	$334,672.81	$380,472.72	$334,672.81	$308,742.99
*4438 MEMORIAL MEDICAL / SOLERA @ WEST HOUSTON	$107,045.35	$250,756.06	$107,045.35	$91,521.66
*4446 MEMORIAL MEDICAL / NH FORT BEND	$49,406.83	$81,593.57	$49,406.83	$32,495.70
*4454 MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	$51,606.43	$64,237.86	$51,606.43	$16,135.67
*4551 CAL CO INDIGENT HEALTHCARE	$9,743.32	$9,743.32	$9,743.32	$9,743.32
*5433 MMC -NH GULF POINTE PLAZA - PRIVATE PAY	$2,190.15	$3,061.03	$2,190.15	$2,190.15
*5441 MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	$2,757.67	$2,757.67	$2,757.67	$2,757.67
*5506 MMC -NH BETHANY SENIOR LIVING	$32,728.86	$136,998.73	$32,728.86	$6,375.34
*3407 MMC -NH TUSCANY VILLAGE	$65,502.17	$65,502.17	$65,502.17	$49,517.88
*3660 MMC -BETHANY SR LIVING - DACA	$100.00	$100.00	$100.00	$100.00
*2998 MMC -MONEY MARKET FUND	$5,034.00	$5,034.00	$5,034.00	$5,034.00
Total Balance	**$3,202,235.89**	**$3,779,520.59**	**$3,202,235.89**	**$3,433,742.95**

Ashford

MEMORIAL MEDICAL CENTER
CHECK REQUEST

PAYEE	MMC Operating	Date Requested:	7/22/2024

APPROVED ON
JUL 22 2024
BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

FOR ACCT USE ONLY

- ☐ Imprest Cash
- ☐ A/P Check
- ☐ Mail Check to Vendor
- ☐ Return Check to Dept

AMOUNT:	$ 4,116.39	G/L NUMBER:	10255040

EXPLANATION: Wellpoint May QIPP - Hospital Portion

REQUESTED BY: Michelle Cumberland

AUTHORIZED BY: [signature]

7/22/2024

Broadmoor

MEMORIAL MEDICAL CENTER
CHECK REQUEST

PAYEE	MMC Operating	Date Requested:	7/22/2024

APPROVED ON
JUL 22 2024
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

FOR ACCT USE ONLY

- ☐ Imprest Cash
- ☐ A/P Check
- ☐ Mail Check to Vendor
- ☐ Return Check to Dept

AMOUNT:	$ 1,466.56	G/L NUMBER:	10255040-

EXPLANATION: Wellpoint May QIPP - Hospital Portion

REQUESTED BY: Michelle Cumberland

AUTHORIZED BY: Andrew [signature] for Santos

7/22/2024

Crescent

MEMORIAL MEDICAL CENTER
CHECK REQUEST

P A Y E E

MMC Operating

Date Requested: 7/22/2024

APPROVED ON
JUL 22 2024
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

FOR ACCT USE ONLY

- ☐ Imprest Cash
- ☐ A/P Check
- ☐ Mail Check to Vendor
- ☐ Return Check to Dept

AMOUNT: $ 1,097.42

G/L NUMBER: 10255040

EXPLANATION: Wellpoint May QIPP - Hospital Portion

REQUESTED BY: Michelle Cumberland

AUTHORIZED BY: [signature]

7/22/2024

Fort Bend

MEMORIAL MEDICAL CENTER
CHECK REQUEST

PAYEE: MMC Operating

Date Requested: 7/22/2024

APPROVED ON
JUL 22 2024
BY COUNTY AUDITOR
COUNTY, TEXAS

FOR ACCT USE ONLY

- ☐ Imprest Cash
- ☐ A/P Check
- ☐ Mail Check to Vendor
- ☐ Return Check to Dept

AMOUNT: $ 1,252.16

G/L NUMBER: 10255040

EXPLANATION: Wellpoint May QIPP - Hospital Portion

REQUESTED BY: Michelle Cumberland

AUTHORIZED BY: [signature]

7/22/2024

Solera

MEMORIAL MEDICAL CENTER
CHECK REQUEST

PAYEE: MMC Operating

Date Requested: 7/22/2024

APPROVED ON
JUL 22 2024
BY COUNTY AUDITOR
CALHOUN COUNTY TEXAS

FOR ACCT USE ONLY

- ☐ Imprest Cash
- ☐ A/P Check
- ☐ Mail Check to Vendor
- ☐ Return Check to Dept

AMOUNT: $ 1,155.83

G/L NUMBER: 10255040

EXPLANATION: Wellpoint May QIPP - Hospital Portion

REQUESTED BY: Michelle Cumberland

AUTHORIZED BY: Andrea DelosSantos

7/22/2024

Golden Creek

MEMORIAL MEDICAL CENTER
CHECK REQUEST

PAYEE: MMC Operating

Date Requested: 7/22/2024

APPROVED ON
JUL 2 2 2024
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

FOR ACCT USE ONLY
- [ ] Imprest Cash
- [ ] A/P Check
- [ ] Mail Check to Vendor
- [ ] Return Check to Dept

AMOUNT: $ 3,329.22

G/L NUMBER: 10255040

EXPLANATION: Superior May QIPP - Hospital Portion

REQUESTED BY: Michelle Cumberland

AUTHORIZED BY: Andrew Castro Santos

7/22/2024

Bethany

MEMORIAL MEDICAL CENTER
CHECK REQUEST

PAYEE: MMC Operating

Date Requested: 7/22/2024

APPROVED ON
JUL 2 2 2024
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

FOR ACCT USE ONLY

- [ ] Imprest Cash
- [ ] A/P Check
- [ ] Mail Check to Vendor
- [ ] Return Check to Dept

AMOUNT: $ 3,593.90

G/L NUMBER: 10255040

EXPLANATION: Superior May QIPP - Hospital Portion

REQUESTED BY: Michelle Cumberland

AUTHORIZED BY: [signature]

7/22/2024

Tuscany

MEMORIAL MEDICAL CENTER
CHECK REQUEST

PAYEE	MMC Operating	Date Requested:	7/22/2024

APPROVED ON
JUL 22 2024
BY COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

FOR ACCT USE ONLY

- ☐ Imprest Cash
- ☐ A/P Check
- ☐ Mail Check to Vendor
- ☐ Return Check to Dept

AMOUNT:	$ 1,681.05	G/L NUMBER:	10255040
EXPLANATION:	Wellpoint May QIPP - Hospital Portion		
REQUESTED BY:	Michelle Cumberland	AUTHORIZED BY:	Andrew De Los Santos

7/22/2024

QIPP PMTS TO MMC 7.22.24

QIPP Payment to MMC from Nursing Facilities **Commissioner's Court** **7/24/2024**

NH Name	From Bank Acct #	Ck #	Payee	GL #	Wellpoint May	Superior May				TOTAL	Date
Ashford	[redacted] Prosperity		MMC -Prosperity Operating [redacted]	10255040	4,116.39					4,116.39	7/24/2024
Broadmoor	[redacted] Prosperity		MMC -Prosperity Operating [redacted]	10255040	1,466.56					1,466.56	7/24/2024
Crescent	[redacted] Prosperity		MMC -Prosperity Operating [redacted]	10255040	1,097.42					1,097.42	7/24/2024
Fort Bend	[redacted] Prosperity		MMC -Prosperity Operating [redacted]	10255040	1,252.16					1,252.16	7/24/2024
Solera	[redacted] Prosperity		MMC -Prosperity Operating [redacted]	10255040	1,155.83					1,155.83	7/24/2024
Golden Creek	[redacted] Prosperity		MMC -Prosperity Operating [redacted]	10255040		3,329.22				3,329.22	7/24/2024
Bethany	[redacted] Prosperity		MMC -Prosperity Operating [redacted]	10255040		3,593.90				3,593.90	7/24/2024
Tuscany	[redacted] Prosperity		MMC -Prosperity Operating [redacted]	10255040	1,681.05					1,681.05	7/24/2024
				Total:	10,769.41	6,923.12	-	-	-	17,692.53	

Note:

Approved: Andrew De Los Santos
ANDREW DE LOS SANTOS 7/22/2024